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FIG. 1

OIPE JC177
DEC 0 3 2003
PATENT & TRADEMARK OFFICE

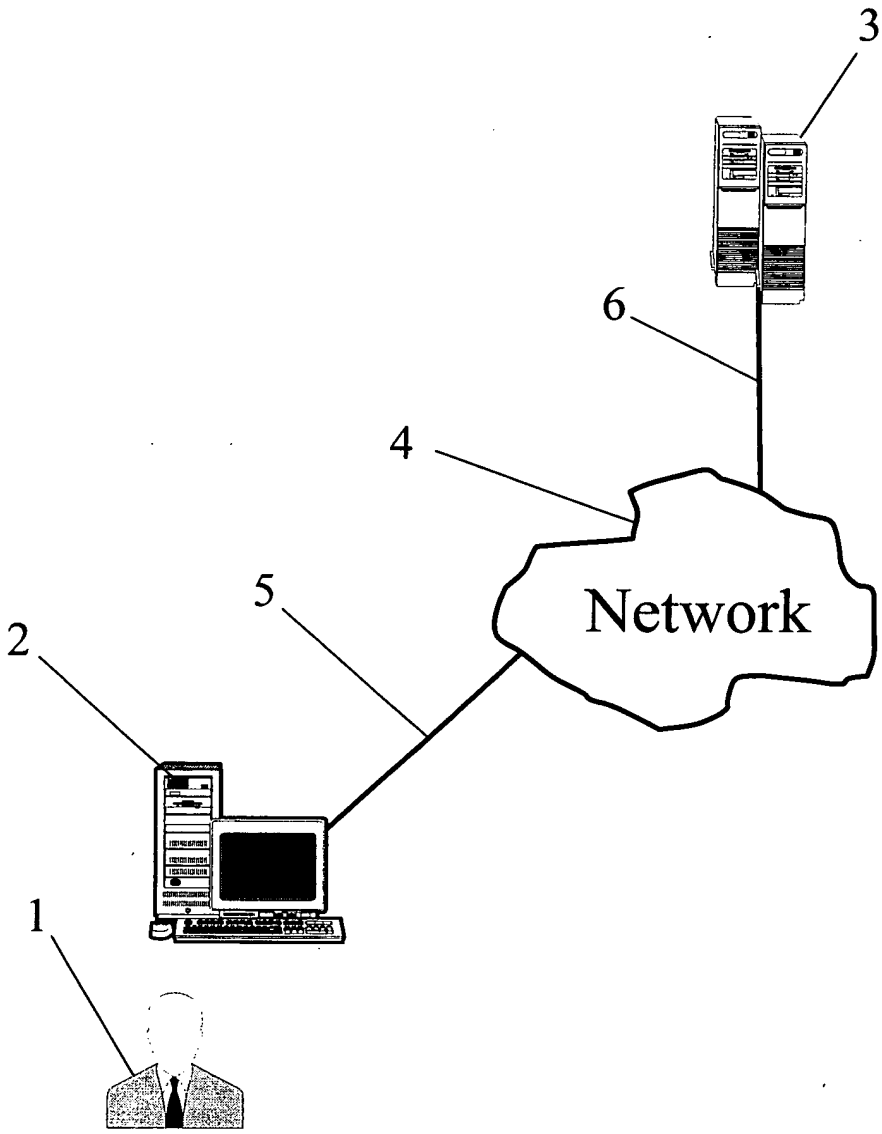
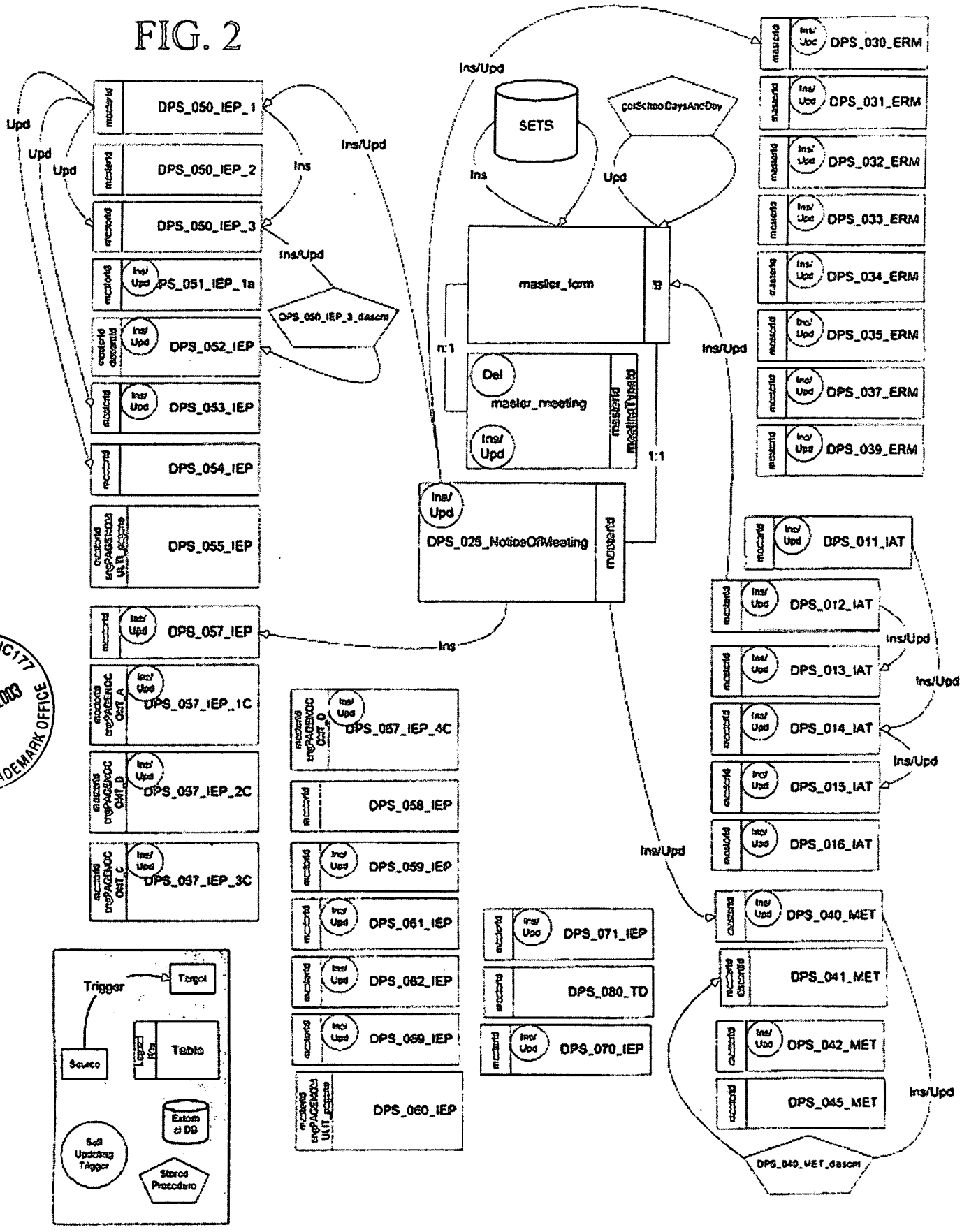


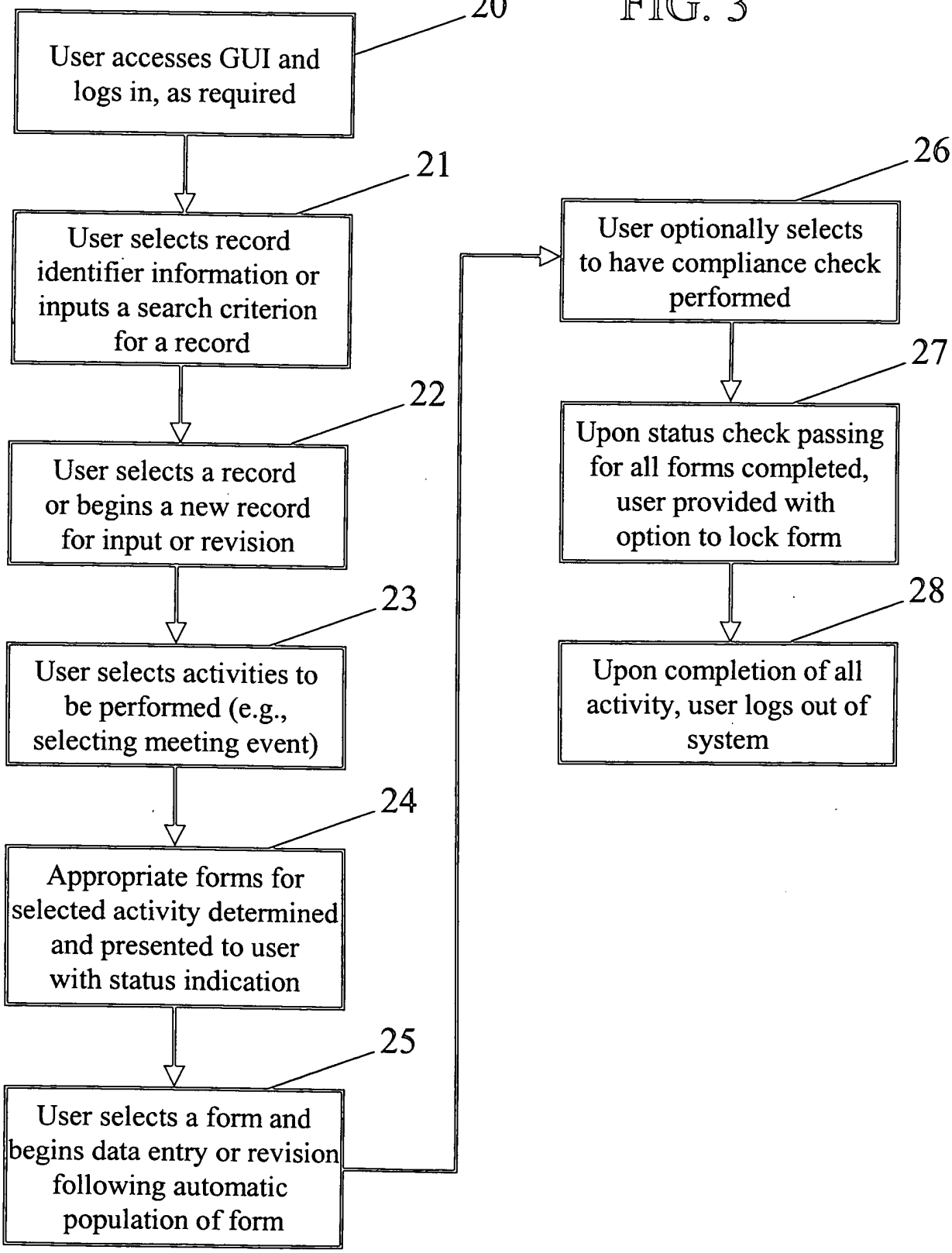
FIG. 2



OIPE JC177
DEC 0 3 2003
PATENT & TRADEMARK OFFICE

OIPE JC177
DEC 0 3 2003
PATENT & TRADEMARK OFFICE

FIG. 3



OIPE JC177
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PATENT & TRADEMARK OFFICE

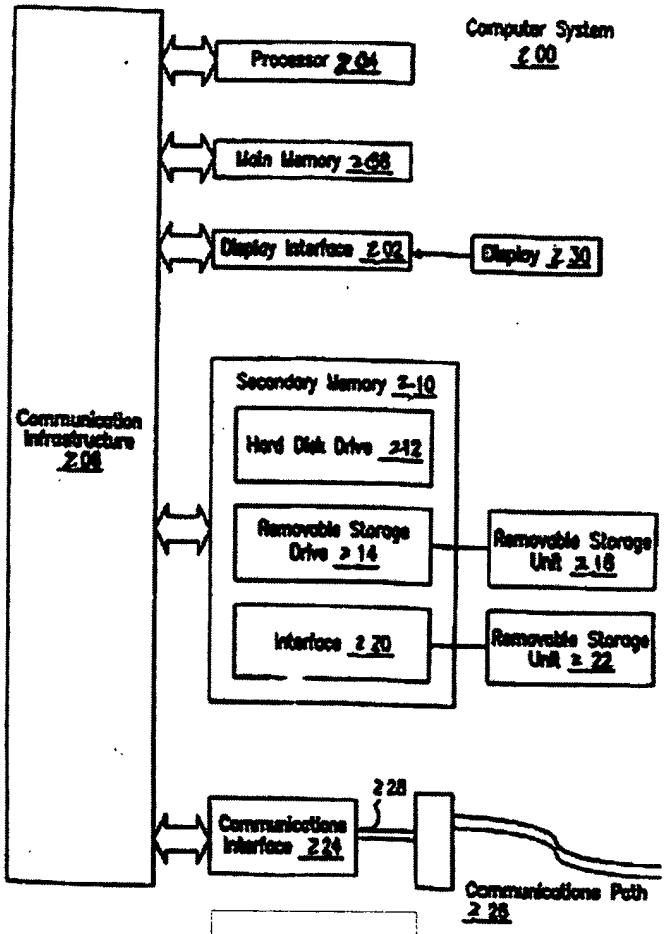
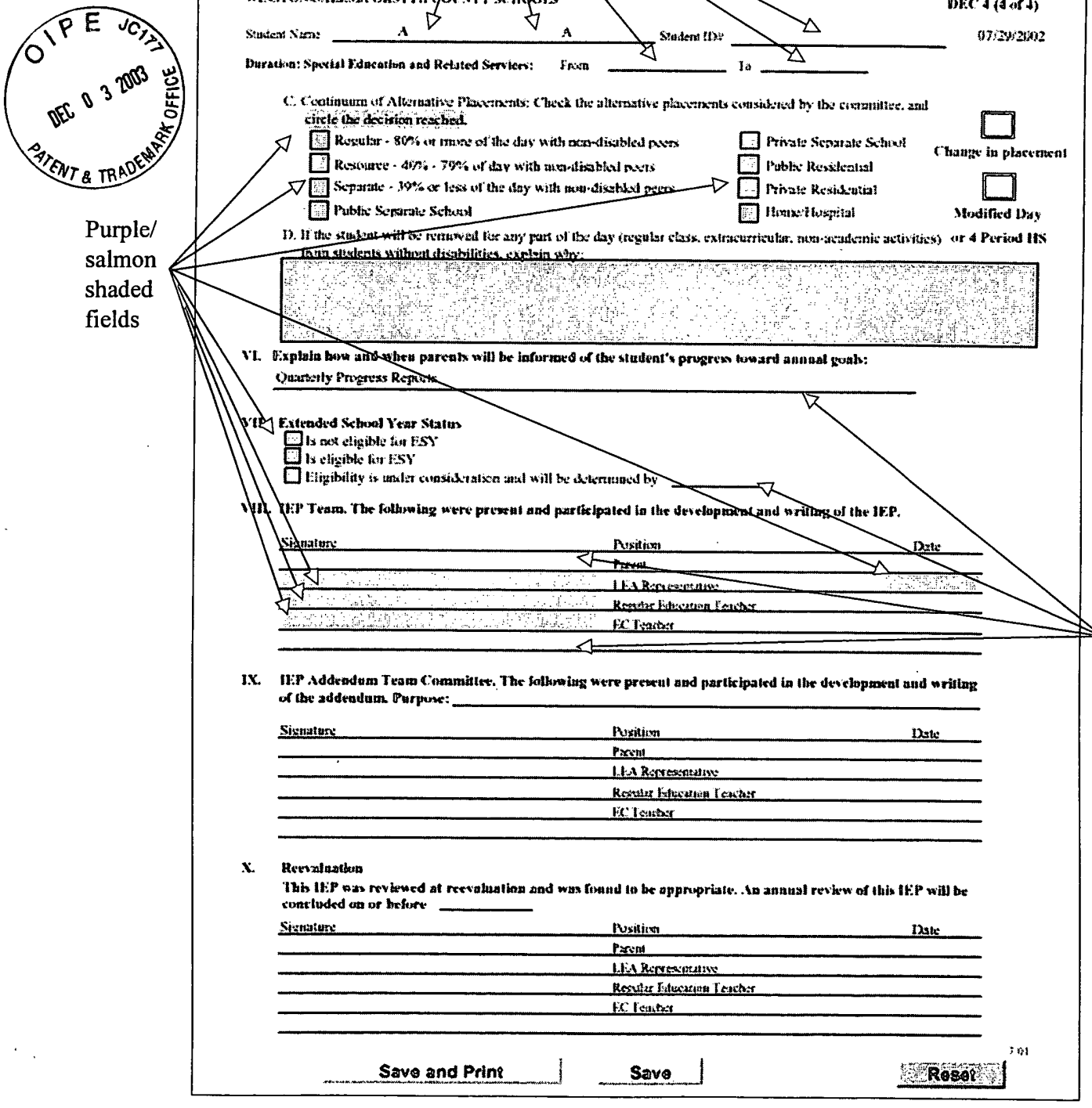


FIG. 4

FIG. 5

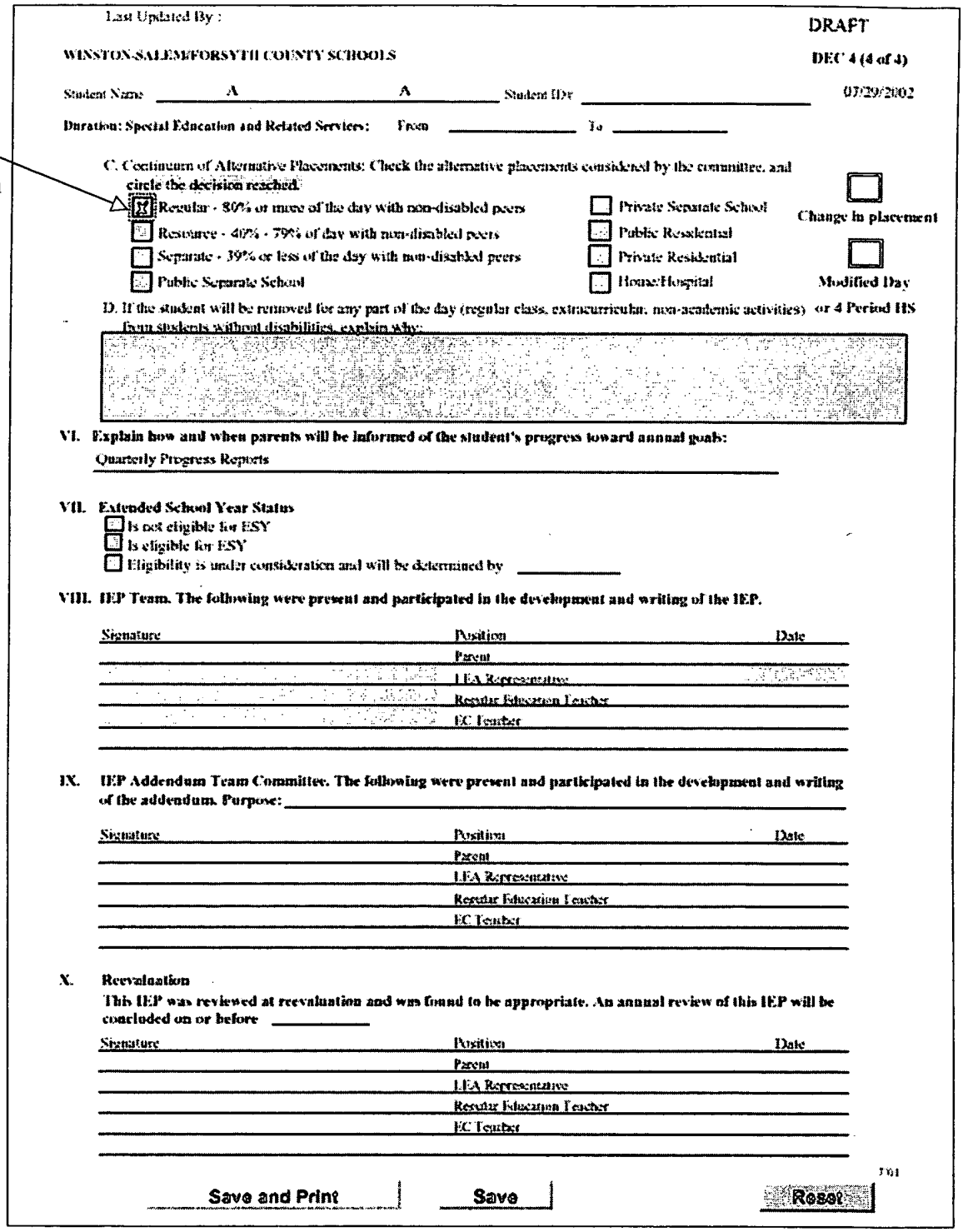


OIPE JC177 DEC 0 3 2003 PATENT & TRADEMARK OFFICE

FIG. 6

Changes to yellow upon completion

OIPE SC17
DEC 0 3 2003
PATENT & TRADEMARK OFFICE



Last Updated By :

DRAFT

WINSTON-SALEM/FORSYTH COUNTY SCHOOLS

DEC 4 (4 of 4)

Student Name A A Student ID# 07/29/2002

Duration: Special Education and Related Services: From To

C. Continuum of Alternative Placements: Check the alternative placements considered by the committee, and circle the decision reached.

- [X] Regular - 80% or more of the day with non-disabled peers
- [ ] Resource - 40% - 79% of day with non-disabled peers
- [ ] Separate - 39% or less of the day with non-disabled peers
- [ ] Public Separate School
- [ ] Private Separate School
- [ ] Public Residential
- [ ] Private Residential
- [ ] Home/Hospital

[ ] Change in placement

[ ] Modified Day or 4 Period HS

D. If the student will be removed for any part of the day (regular class, extracurricular, non-academic activities) from students without disabilities, explain why:

VI. **Explain how and when parents will be informed of the student's progress toward annual goals:**

Quarterly Progress Reports

VII. **Extended School Year Status**

- [ ] Is not eligible for ESY
- [ ] Is eligible for ESY
- [ ] Eligibility is under consideration and will be determined by

VIII. **IEP Team. The following were present and participated in the development and writing of the IEP.**

Signature	Position	Date
	Parent	
	LEA Representative	
	Regular Education Teacher	
	EC Teacher	

IX. **IEP Addendum Team Committee. The following were present and participated in the development and writing of the addendum. Purpose:**

Signature	Position	Date
	Parent	
	LEA Representative	
	Regular Education Teacher	
	EC Teacher	

X. **Reevaluation**

This IEP was reviewed at reevaluation and was found to be appropriate. An annual review of this IEP will be concluded on or before

Signature	Position	Date
	Parent	
	LEA Representative	
	Regular Education Teacher	
	EC Teacher	

7/01

Save and Print | Save | Reset

All Yellow

FIG. 7

Last Updated By :

DRAFT

WINSTON-SALEM/FORSYTH COUNTY SCHOOLS

DEC 4 (4 of 4)

Student Name: A A Student ID#: 07/29/2002

Duration: Special Education and Related Services: From To

C. Continuum of Alternative Placements: Check the alternative placements considered by the committee, and circle the decision reached.

- [X] Regular - 80% or more of the day with non-disabled peers
- [ ] Resource - 40% - 79% of day with non-disabled peers
- [X] Separate - 39% or less of the day with non-disabled peers
- [ ] Public Separate School
- [ ] Private Separate School
- [ ] Public Residential
- [X] Private Residential
- [ ] Home/Hospital

[ ] Change in placement

[ ] Modified Day

D. If the student will be removed for any part of the day (regular class, extracurricular, non-academic activities) or 4 Period HS from students without disabilities, explain why:

VI. **Explain how and when parents will be informed of the student's progress toward annual goals:**

Quarterly Progress Reports

VII. **Extended School Year Status**

- [ ] Is not eligible for ESY
- [ ] Is eligible for ESY
- [X] Eligibility is under consideration and will be determined by

Purple/ salmon shaded field

VIII. **IEP Team. The following were present and participated in the development and writing of the IEP.**

Signature	Position	Date
	Parent	
	LEA Representative	
	Regular Education Teacher	
	EC Teacher	

IX. **IEP Addendum Team Committee. The following were present and participated in the development and writing of the addendum. Purpose:**

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This IEP was reviewed at reevaluation and was found to be appropriate. An annual review of this IEP will be concluded on or before

Signature	Position	Date
	Parent	
	LEA Representative	
	Regular Education Teacher	
	EC Teacher	

7.01

Save and Print | Sav | Reset

PATENT & TRADEMARK OFFICE
DEC 0 3 2003
OIPE
SC177

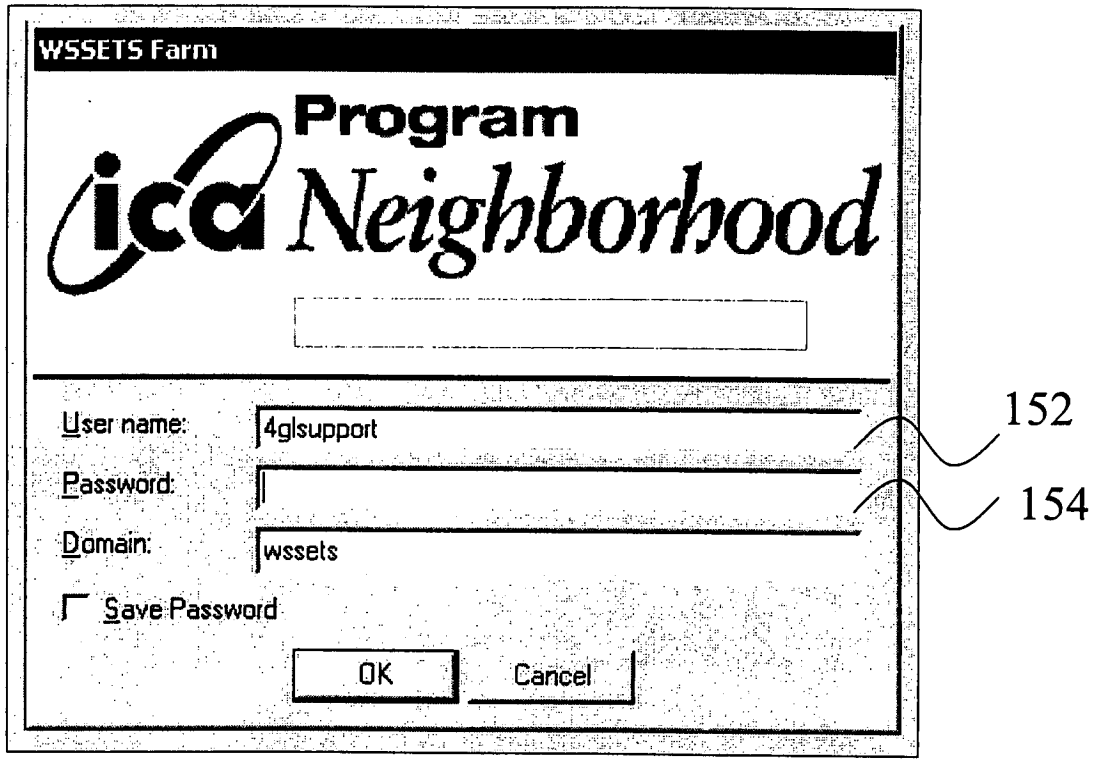


FIG. 8

150

OIPE
DEC 0 3 2003
PATENT & TRADEMARK OFFICE
JC17

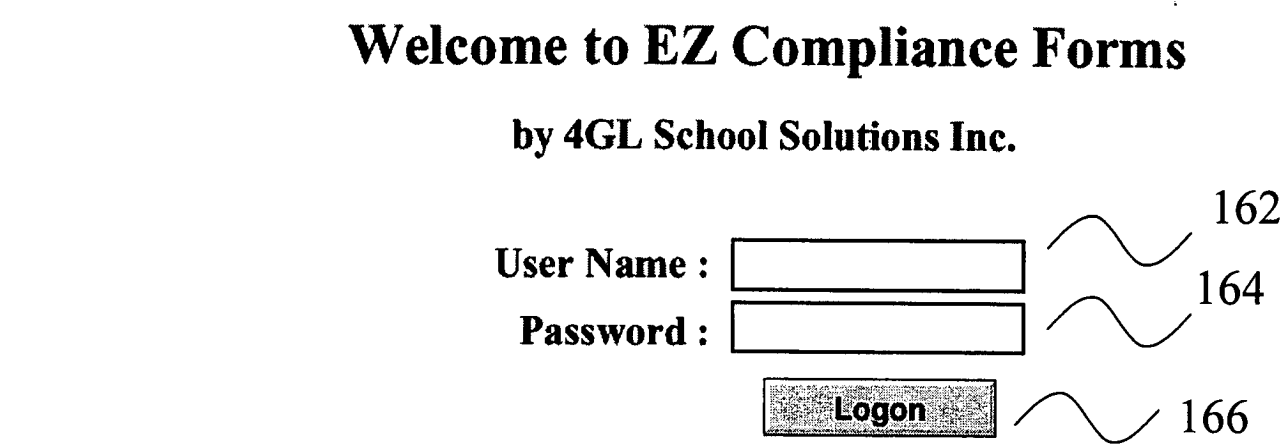


FIG. 9

160

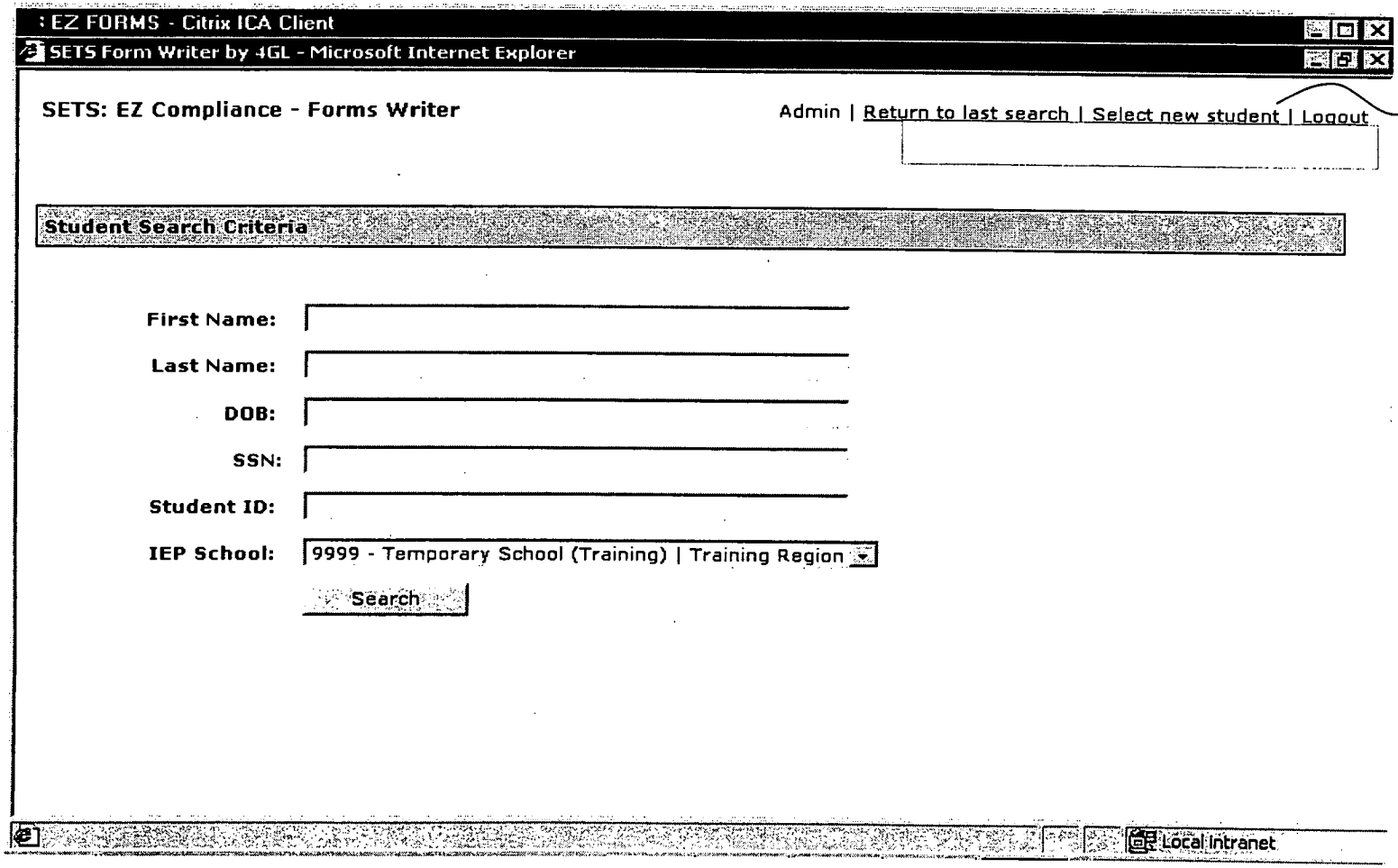

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
172
SETS: EZ Compliance - Forms Writer
Admin | Return to last search | Select new student | Logout
Student Search Criteria
First Name:
Last Name:
DOB:
SSN:
Student ID:
IEP School:
9999 - Temporary School (Training) | Training Region
Search
Local intranet

FIG. 10

170

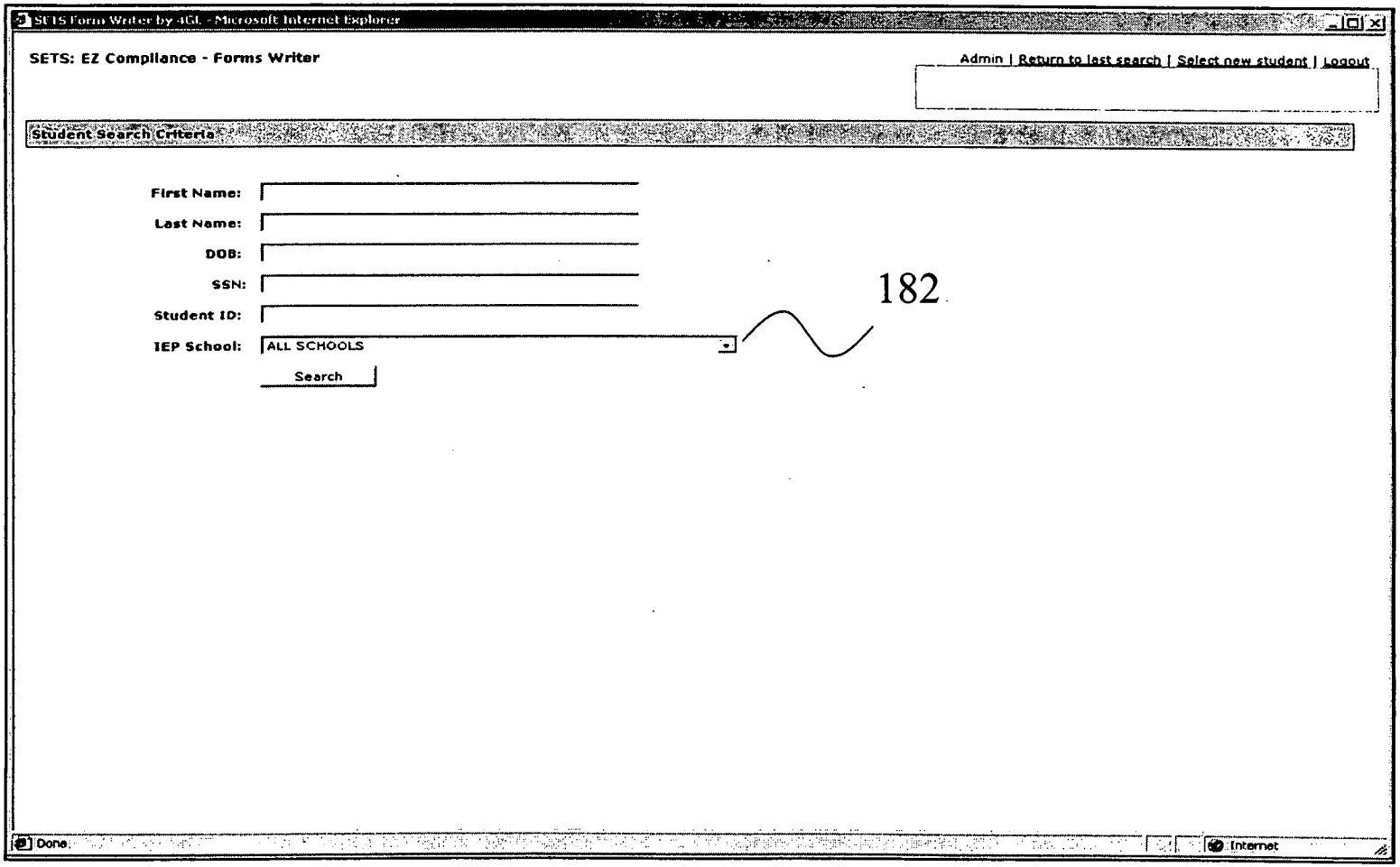

SETS Form Writer by 4GL - Microsoft Internet Explorer
SETS: EZ Compliance - Forms Writer
Admin | Return to last search | Select new student | Logout
Student Search Criteria
First Name:
Last Name:
DOB:
SSN:
Student ID:
IEP School:
ALL SCHOOLS
Search
182
Done
Internet

FIG. 11

170

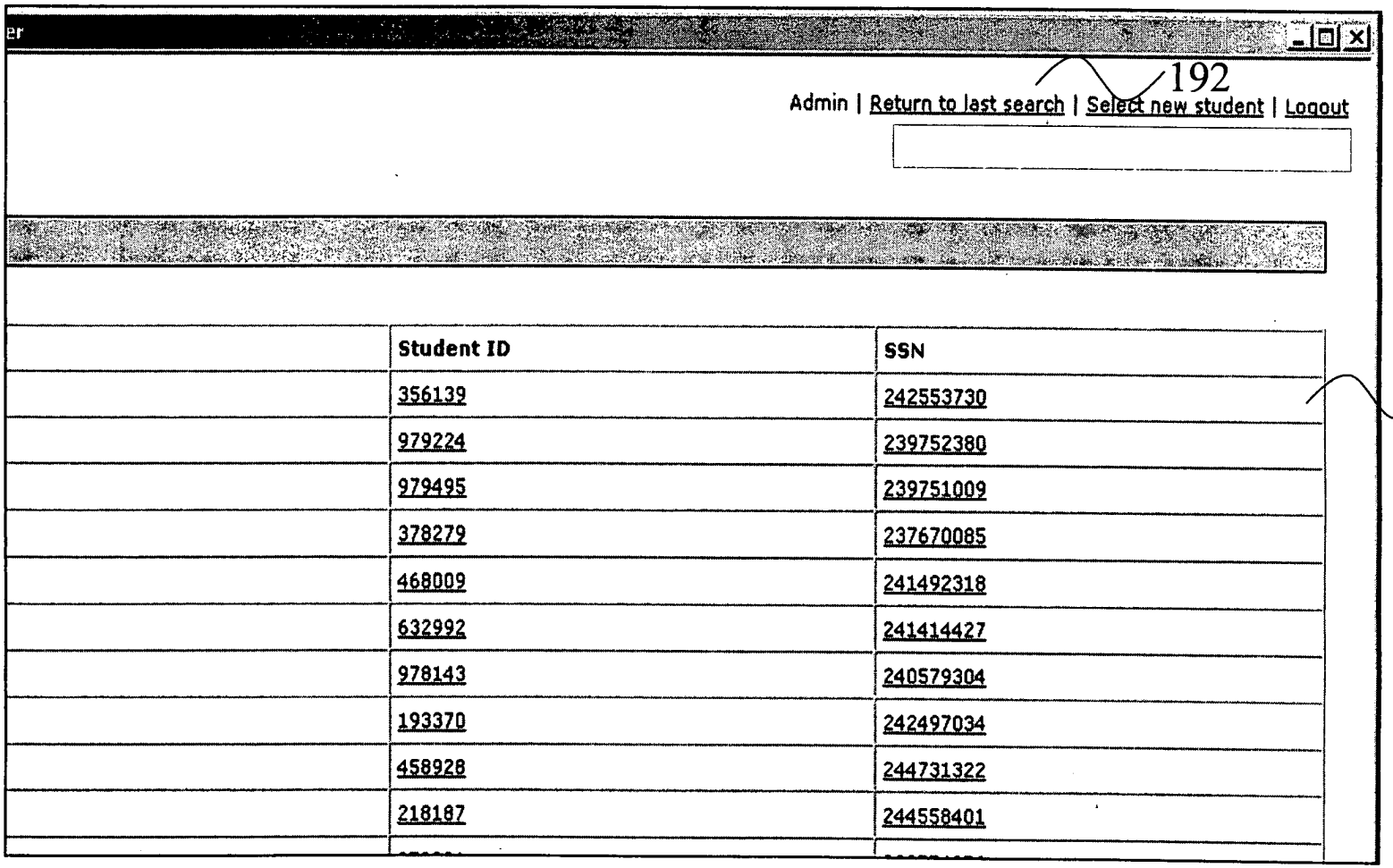

er
192
Admin | Return to last search | Select new student | Logout
Student ID
SSN
194
356139
242553730
979224
239752380
979495
239751009
378279
237670085
468009
241492318
632992
241414427
978143
240579304
193370
242497034
458928
244731322
218187
244558401

FIG. 12

190

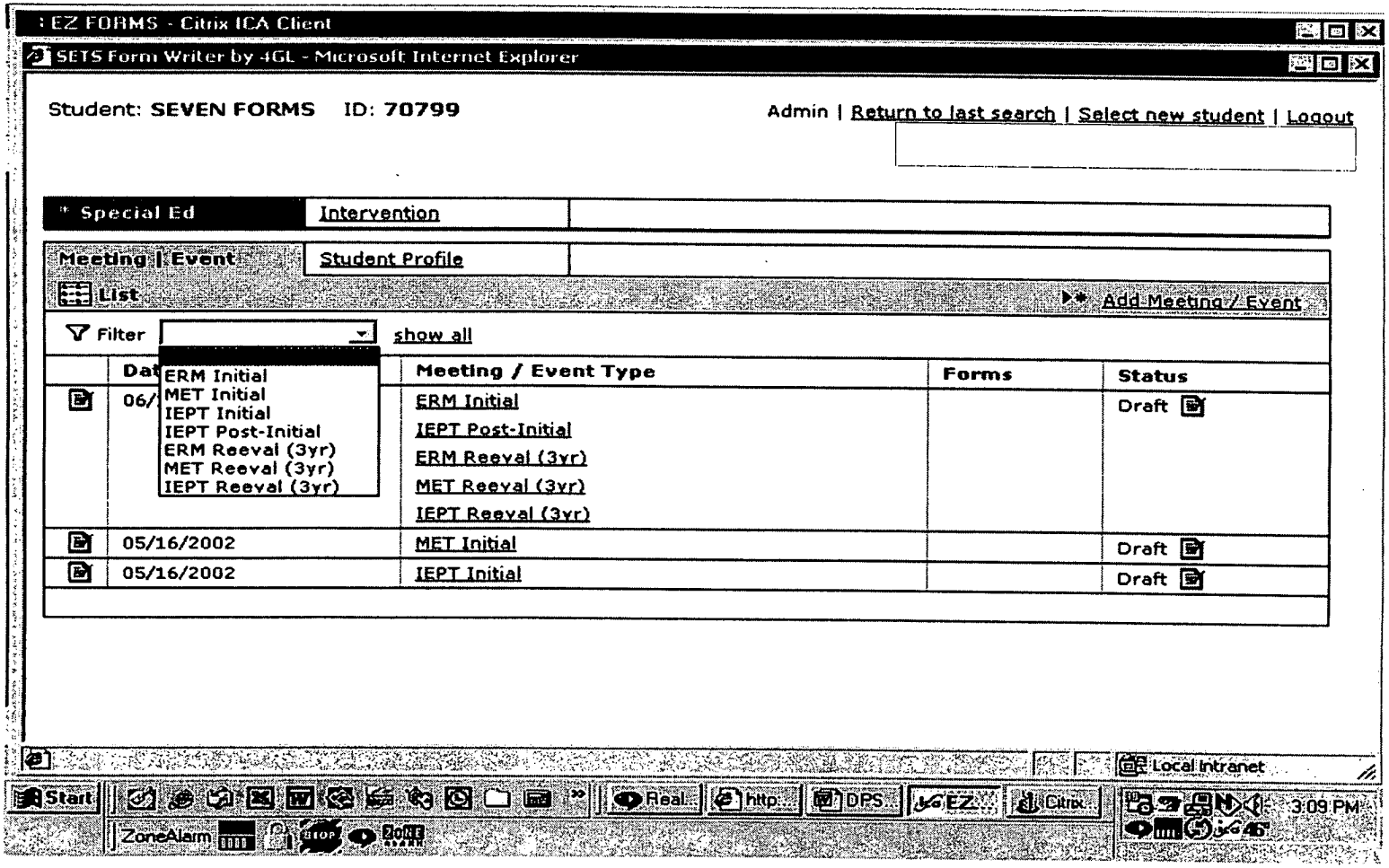

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
Special Ed
Intervention
Meeting | Event
Student Profile
List
Add Meeting / Event
Filter
show all
ERM Initial
MET Initial
IEPT Initial
IEPT Post-Initial
ERM Reeval (3yr)
MET Reeval (3yr)
IEPT Reeval (3yr)
Meeting / Event Type
Forms
Status
ERM Initial
IEPT Post-Initial
ERM Reeval (3yr)
MET Reeval (3yr)
IEPT Reeval (3yr)
Draft
05/16/2002
MET Initial
Draft
05/16/2002
IEPT Initial
Draft
Local Intranet
Start
Real
http
DPS
EZ
Citrix
3:09 PM
ZoneAlarm

FIG. 13

200

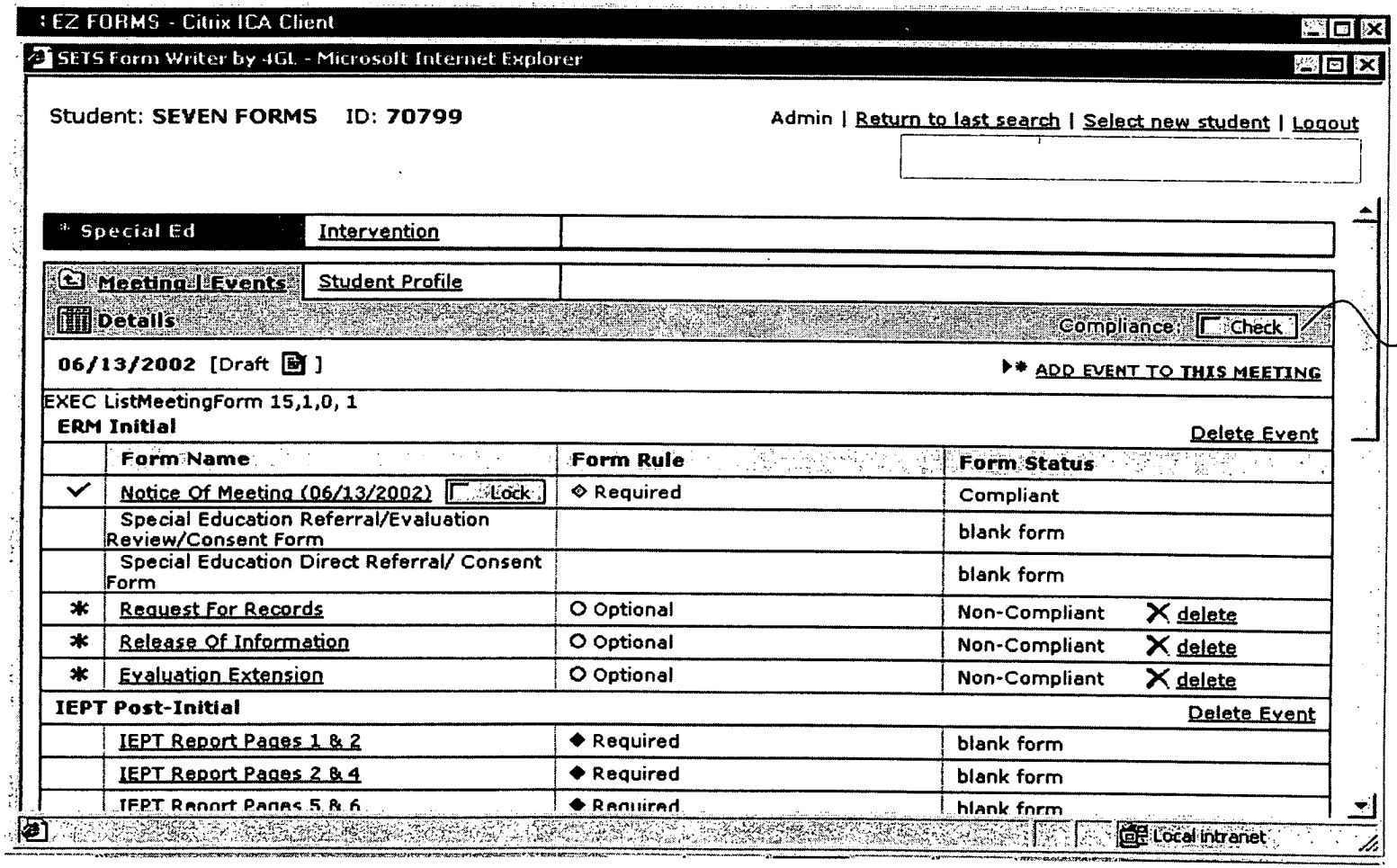

: EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
Special Ed
Intervention
Meeting / Events
Student Profile
Details
Compliance: Check
06/13/2002 [Draft]
ADD EVENT TO THIS MEETING
EXEC ListMeetingForm 15,1,0, 1
ERM Initial
Delete Event
Form Name
Form Rule
Form Status
Notice Of Meeting (06/13/2002) Lock
Required
Compliant
Special Education Referral/Evaluation Review/Consent Form
blank form
Special Education Direct Referral/ Consent Form
blank form
Request For Records
Optional
Non-Compliant
delete
Release Of Information
Optional
Non-Compliant
delete
Evaluation Extension
Optional
Non-Compliant
delete
IEPT Post-Initial
Delete Event
IEPT Report Pages 1 & 2
Required
blank form
IEPT Report Pages 2 & 4
Required
blank form
Local intranet
212

FIG. 14

210

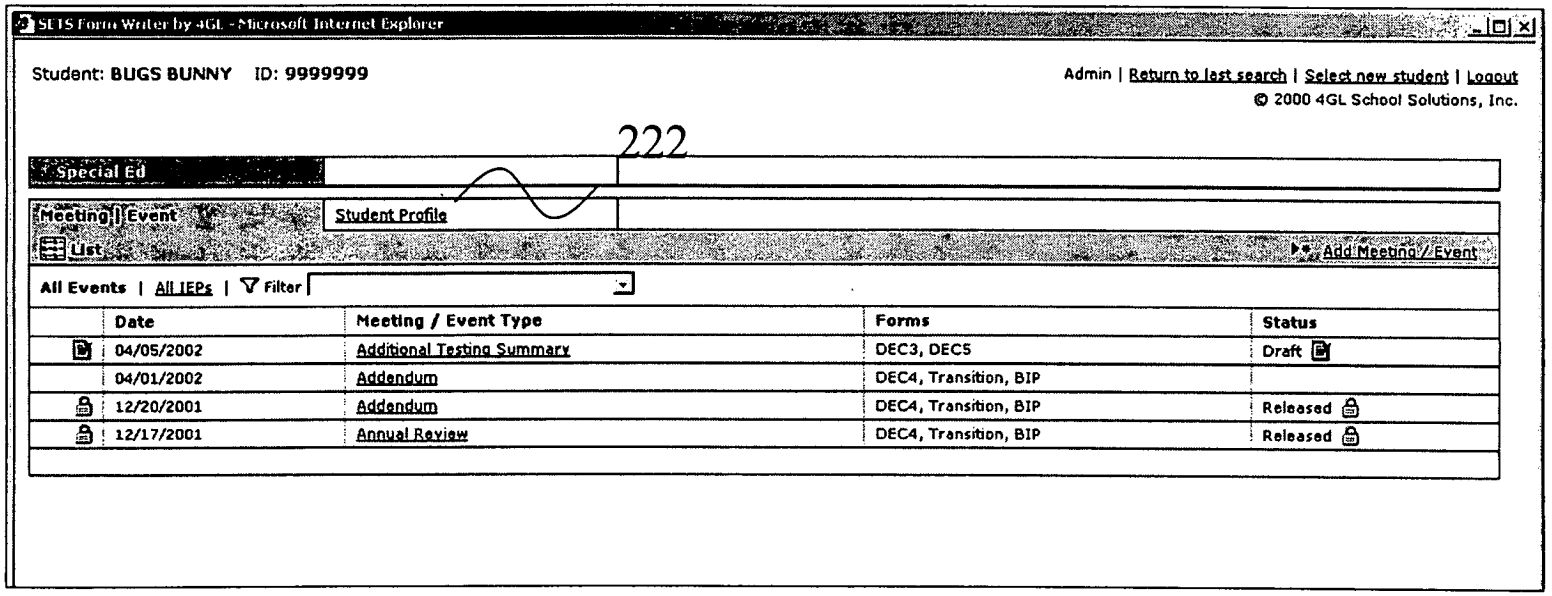

SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: BUGS BUNNY ID: 9999999
Admin | Return to last search | Select new student | Logout
© 2000 4GL School Solutions, Inc.
222
Special Ed
Meeting / Event
Student Profile
List
Add Meeting / Event
All Events | All IEPs | Filter
Date
Meeting / Event Type
Forms
Status
04/05/2002
Additional Testing Summary
DEC3, DEC5
Draft
04/01/2002
Addendum
DEC4, Transition, BIP
12/20/2001
Addendum
DEC4, Transition, BIP
Released
12/17/2001
Annual Review
DEC4, Transition, BIP
Released

FIG. 15

220

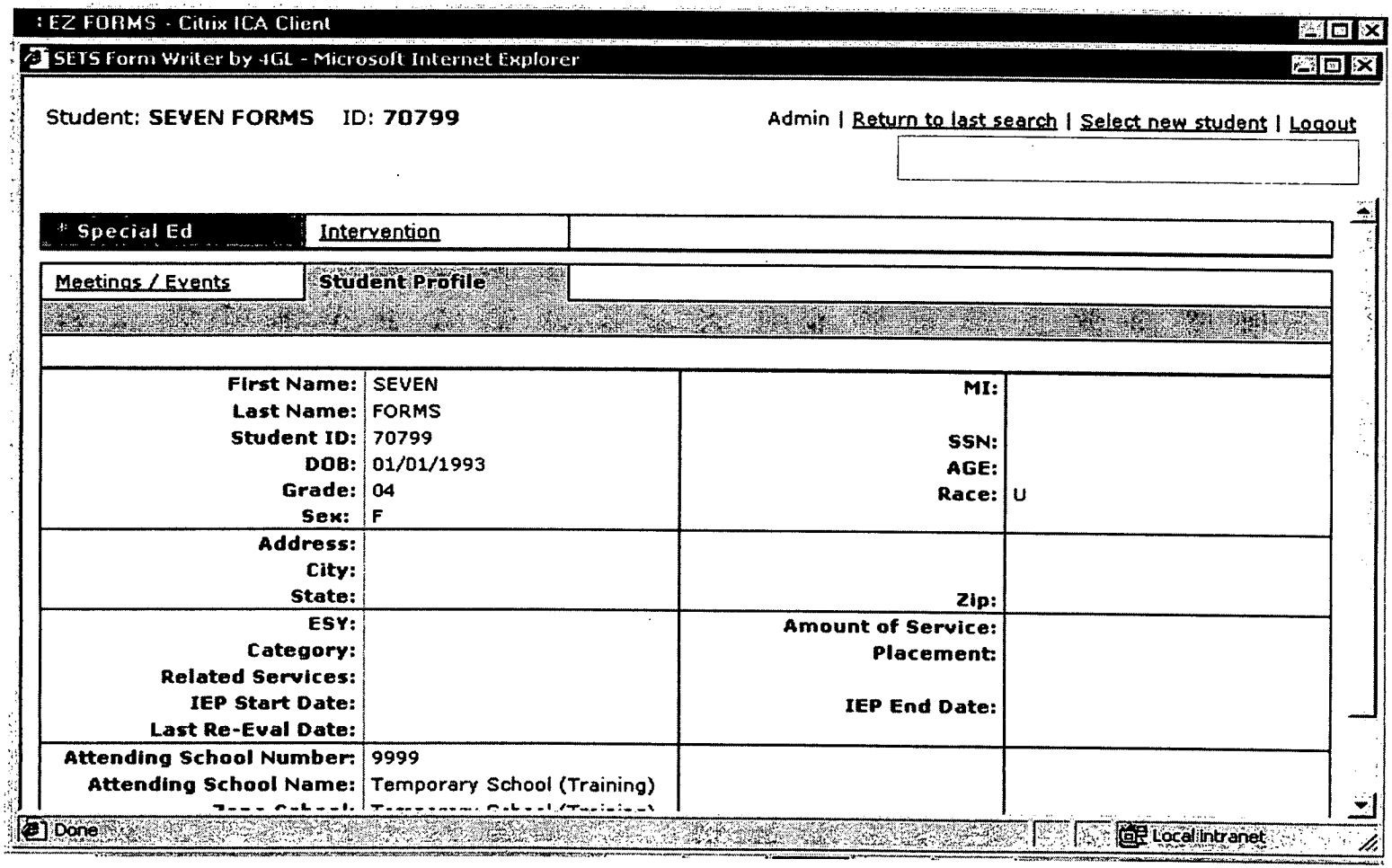

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
Special Ed
Intervention
Meetings / Events
Student Profile
First Name: SEVEN
Last Name: FORMS
Student ID: 70799
DOB: 01/01/1993
Grade: 04
Sex: F
MI:
SSN:
AGE:
Race: U
Address:
City:
State:
Zip:
ESY:
Category:
Related Services:
IEP Start Date:
Last Re-Eval Date:
Amount of Service:
Placement:
IEP End Date:
Attending School Number: 9999
Attending School Name: Temporary School (Training)
Done
Local intranet

FIG. 16

230

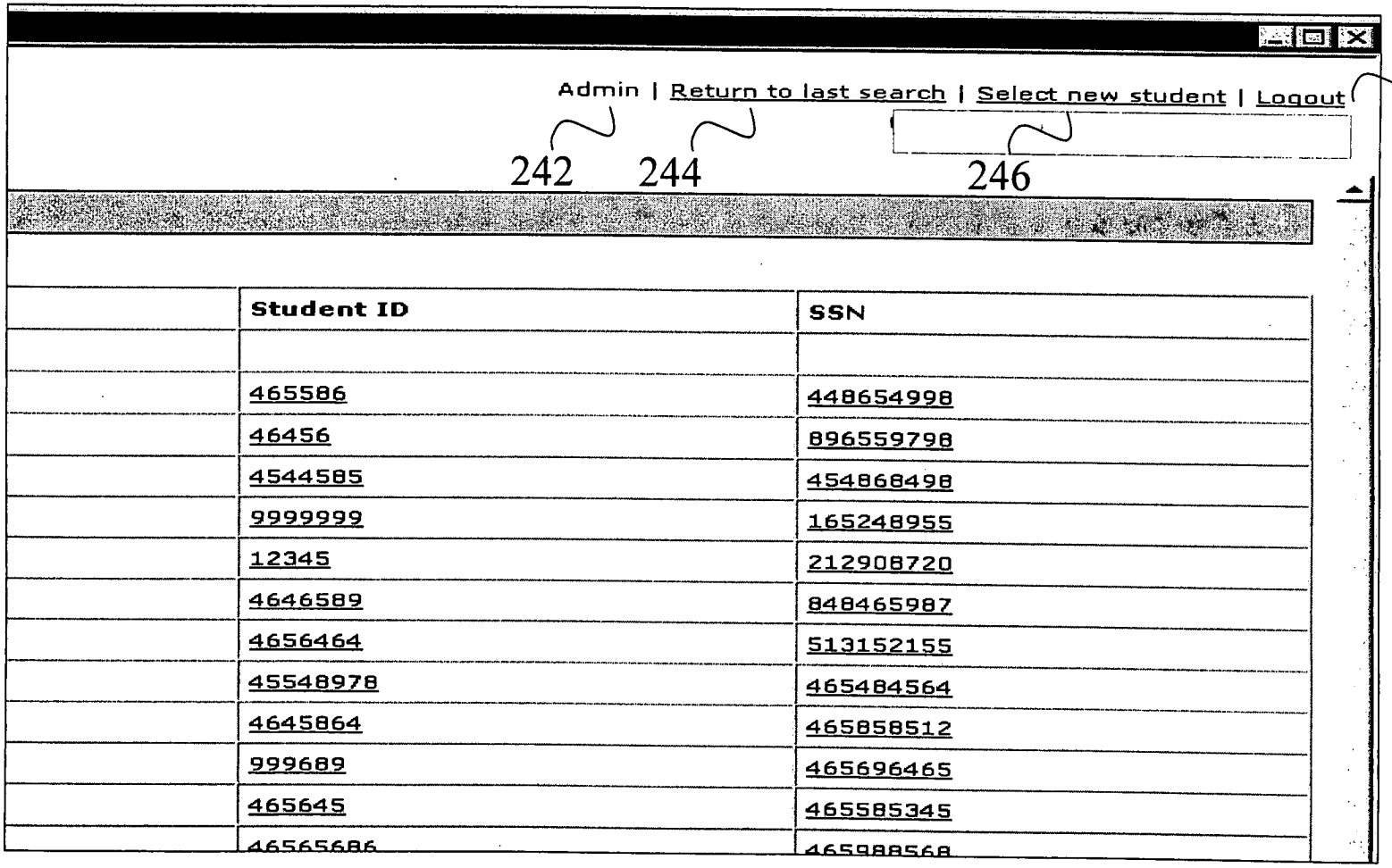

Admin | Return to last search | Select new student | Logout
248
242
244
246
Student ID
SSN
465586
448654998
46456
896559798
4544585
454868498
9999999
165248955
12345
212908720
4646589
848465987
4656464
513152155
45548978
465484564
4645864
465858512
999689
465696465
465645
465585345
46565686
465988568

FIG. 17

240

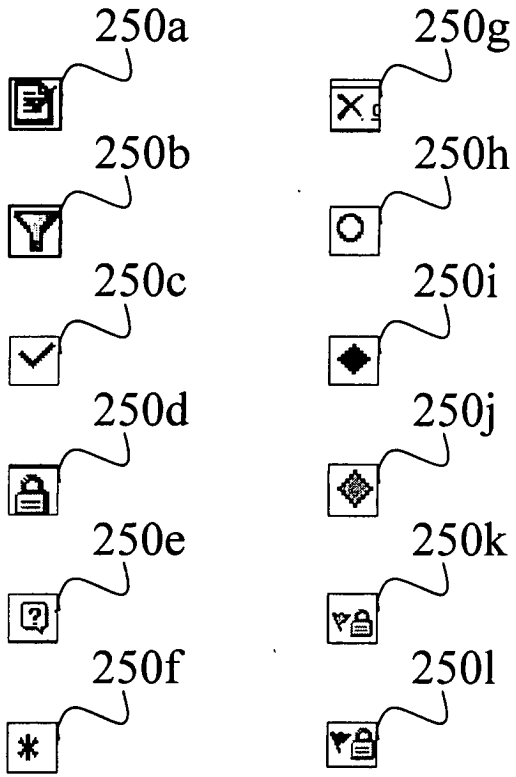


FIG. 18

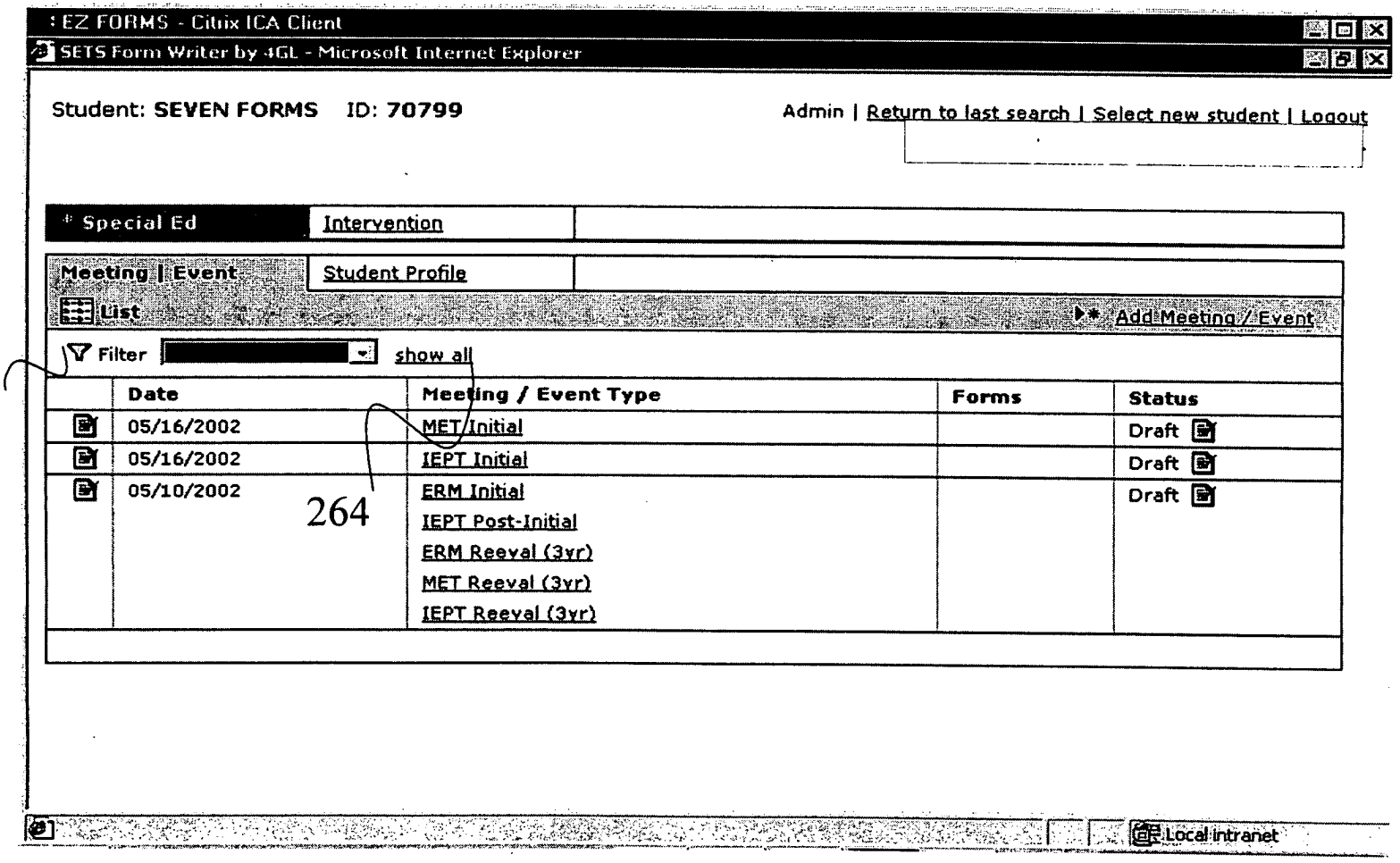

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
Special Ed
Intervention
Meeting | Event
Student Profile
List
Add Meeting / Event
Filter
show all
262
264
Date
Meeting / Event Type
Forms
Status
05/16/2002
MET Initial
Draft
05/16/2002
IEPT Initial
Draft
05/10/2002
ERM Initial
IEPT Post-Initial
ERM Reeval (3yr)
MET Reeval (3yr)
IEPT Reeval (3yr)
Draft
Local intranet

FIG. 19

260

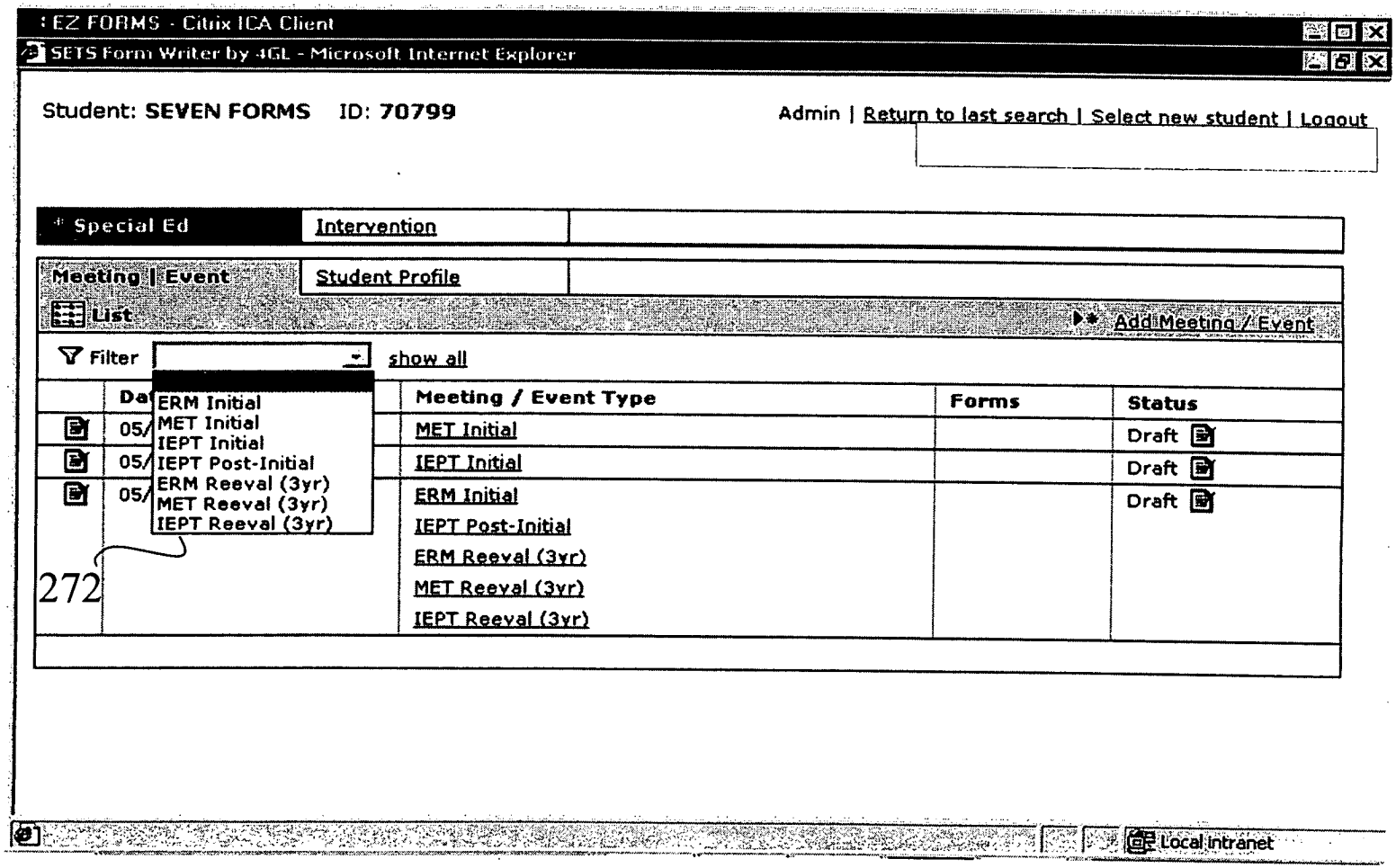

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
Special Ed
Intervention
Meeting | Event
Student Profile
List
Add Meeting / Event
Filter
show all
ERM Initial
MET Initial
IEPT Initial
IEPT Post-Initial
ERM Reeval (3yr)
MET Reeval (3yr)
IEPT Reeval (3yr)
Meeting / Event Type
Forms
Status
MET Initial
Draft
IEPT Initial
Draft
ERM Initial
IEPT Post-Initial
ERM Reeval (3yr)
MET Reeval (3yr)
IEPT Reeval (3yr)
Draft
272
Local intranet

FIG. 20

260

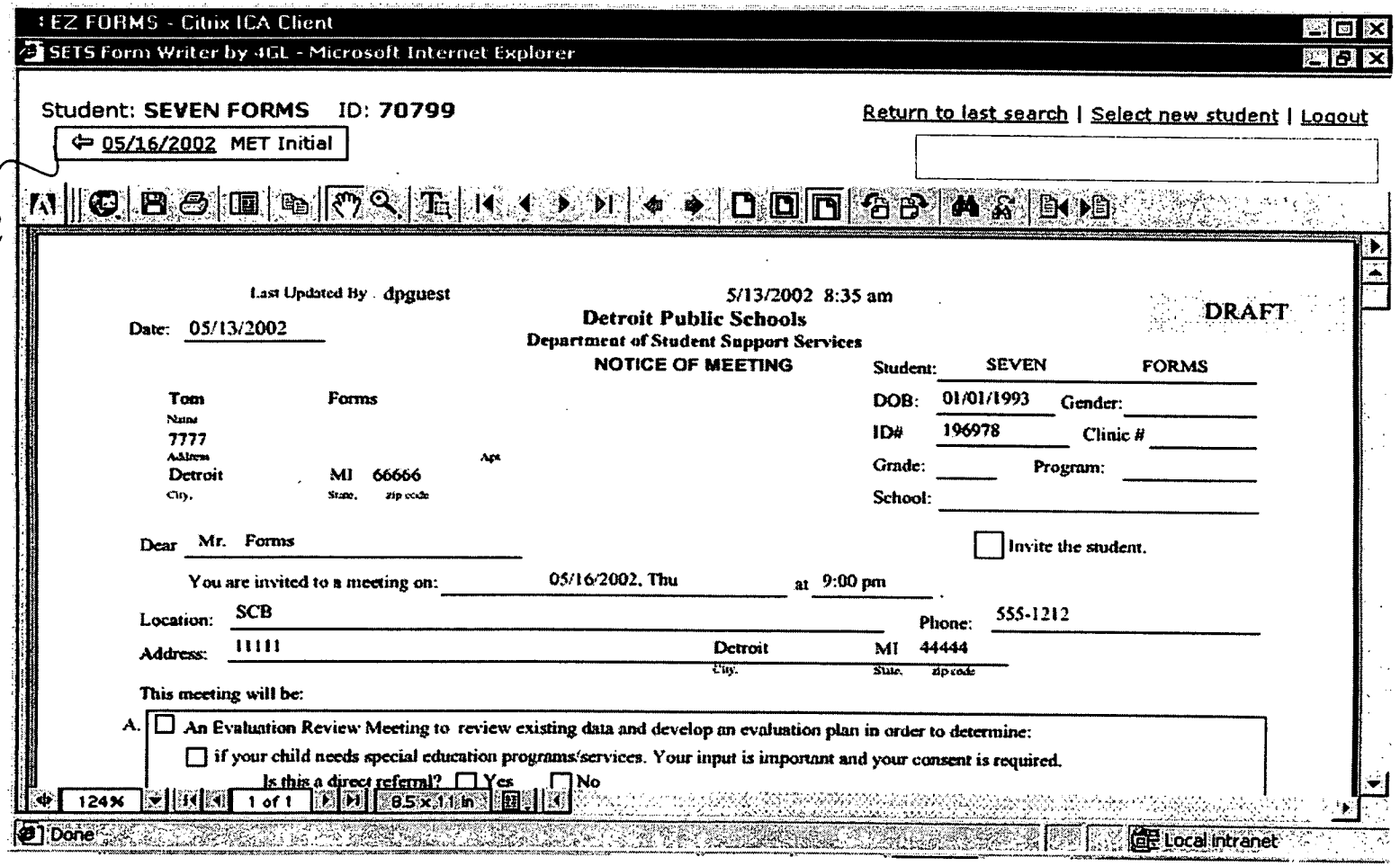

: EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Return to last search | Select new student | Logout
05/16/2002 MET Initial
282
Last Updated By . dpguest
5/13/2002 8:35 am
DRAFT
Date: 05/13/2002
Detroit Public Schools
Department of Student Support Services
NOTICE OF MEETING
Student: SEVEN FORMS
Tom Forms
Name
7777
Address
Apt
Detroit MI 66666
City, State, zip code
DOB: 01/01/1993 Gender:
ID# 196978 Clinic #
Grade: Program:
School:
Dear Mr. Forms
Invite the student.
You are invited to a meeting on: 05/16/2002, Thu at 9:00 pm
Location: SCB Phone: 555-1212
Address: 11111 Detroit MI 44444
City. State. zip code
This meeting will be:
A. An Evaluation Review Meeting to review existing data and develop an evaluation plan in order to determine:
if your child needs special education programs/services. Your input is important and your consent is required.
Is this a direct referral? Yes No
124%
1 of 1
8.5 x 11 in
Done
Local intranet

FIG. 21

280

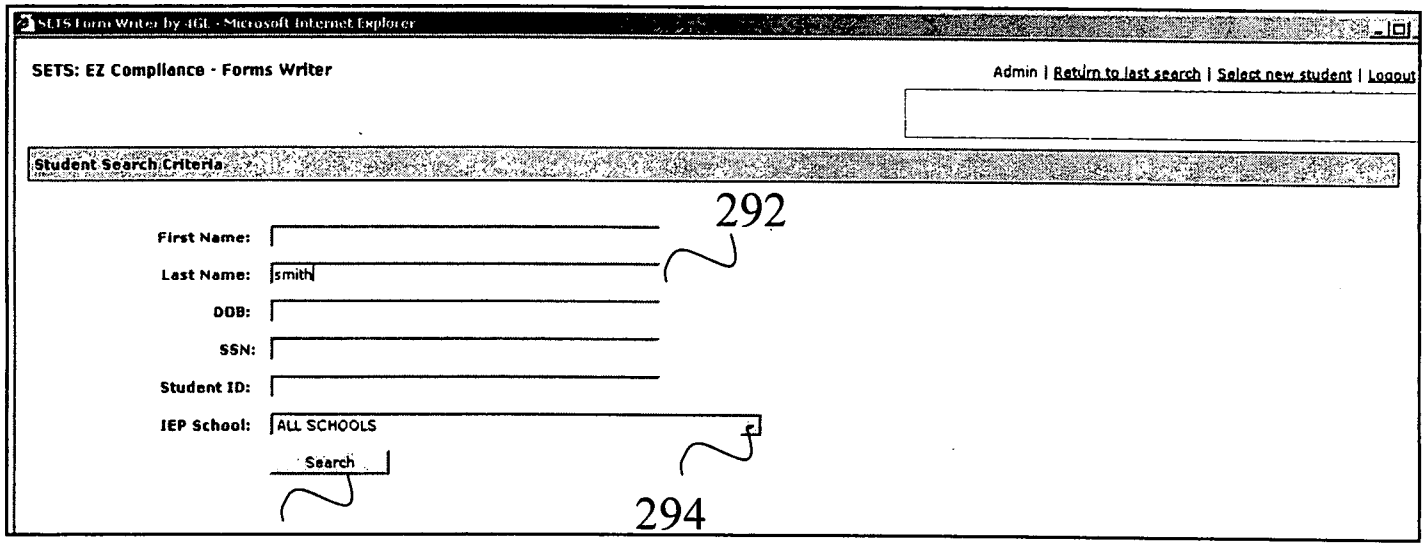
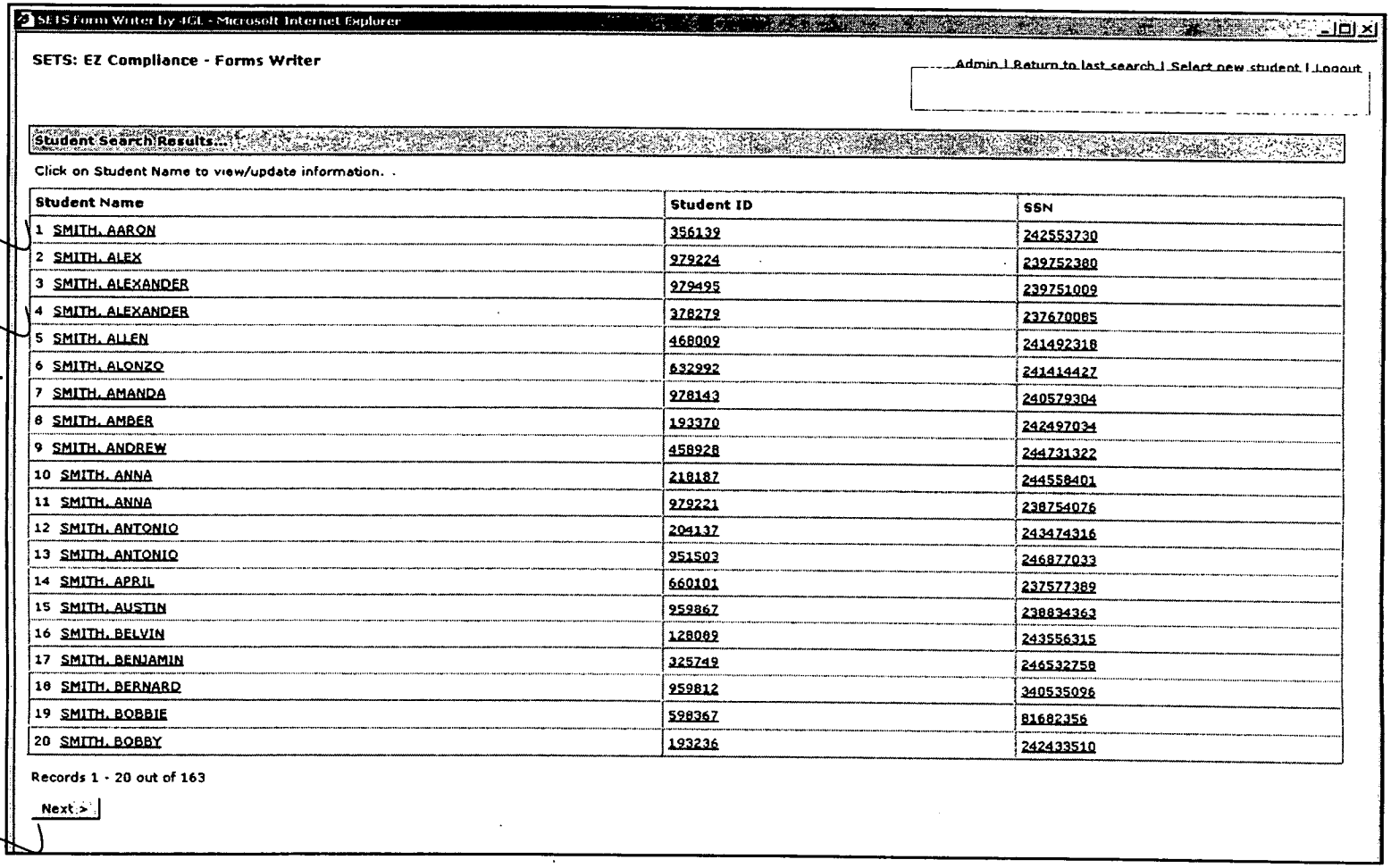

SETS Form Writer by AGL - Microsoft Internet Explorer
SETS: EZ Compliance - Forms Writer
Admin | Return to last search | Select new student | Logout
Student Search Criteria
First Name:
Last Name:
smith
DOB:
SSN:
Student ID:
IEP School:
ALL SCHOOLS
Search
292
294
296

FIG. 22

290



302

304

306

FIG. 23

300

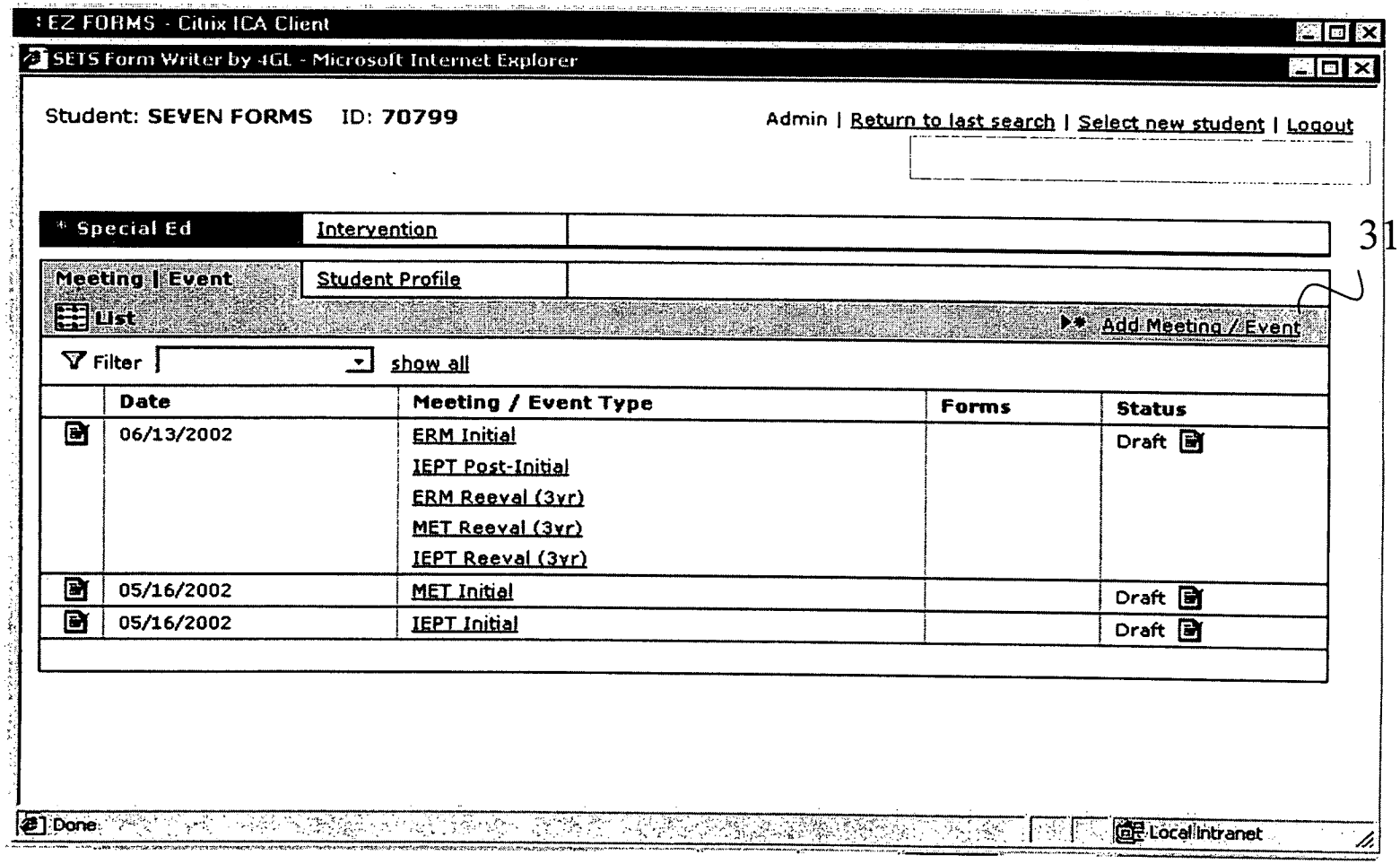

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
Special Ed
Intervention
Meeting | Event
Student Profile
List
Add Meeting / Event
312
Filter
show all
Date
Meeting / Event Type
Forms
Status
06/13/2002
ERM Initial
IEPT Post-Initial
ERM Reeval (3yr)
MET Reeval (3yr)
IEPT Reeval (3yr)
Draft
05/16/2002
MET Initial
Draft
05/16/2002
IEPT Initial
Draft
Done
Local intranet

FIG. 24

310

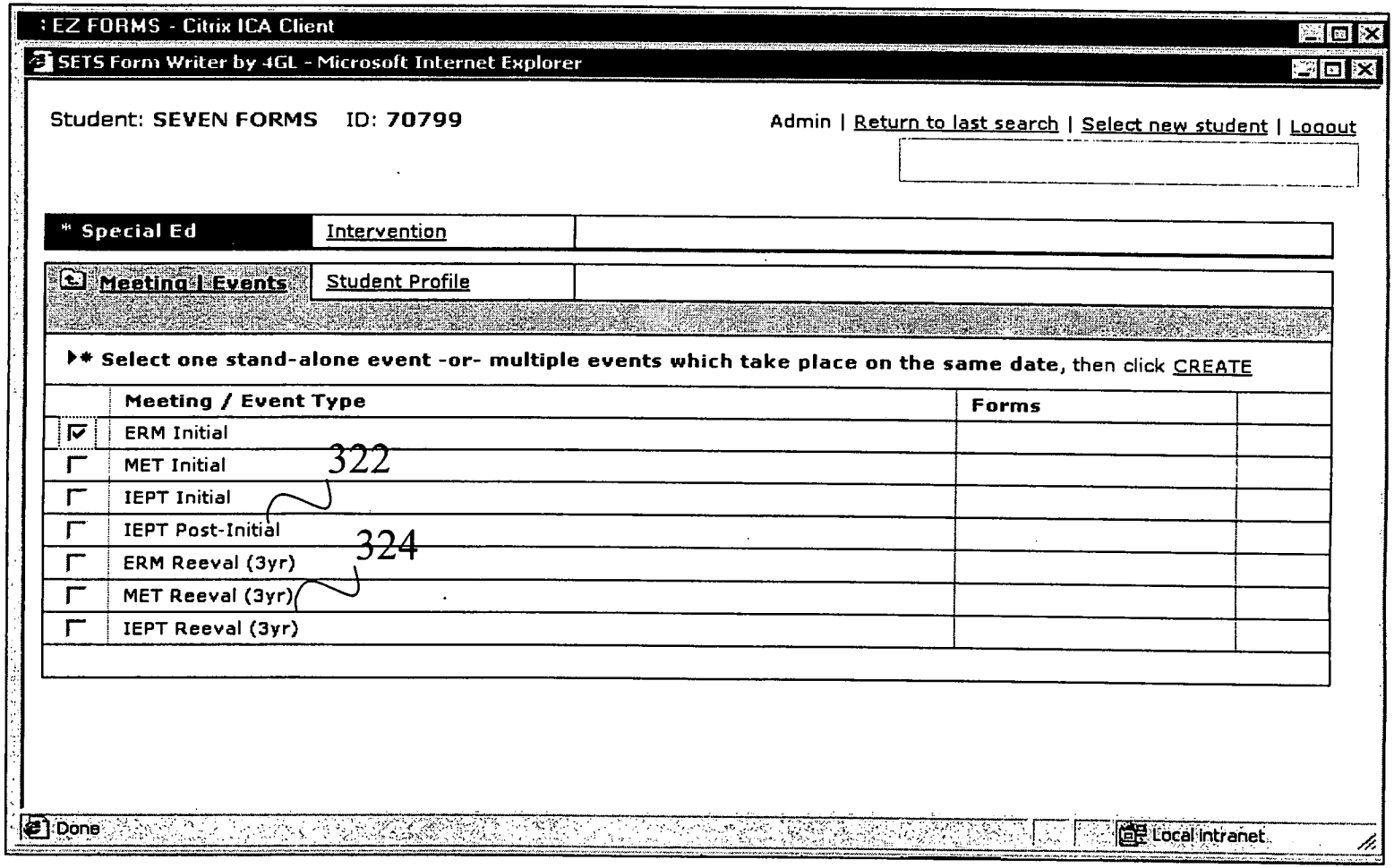

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
* Special Ed
Intervention
Meeting / Events
Student Profile
** Select one stand-alone event -or- multiple events which take place on the same date, then click CREATE
Meeting / Event Type
Forms
ERM Initial
MET Initial
IEPT Initial
IEPT Post-Initial
ERM Reeval (3yr)
MET Reeval (3yr)
IEPT Reeval (3yr)
322
324
Done
Local intranet

FIG. 25

320

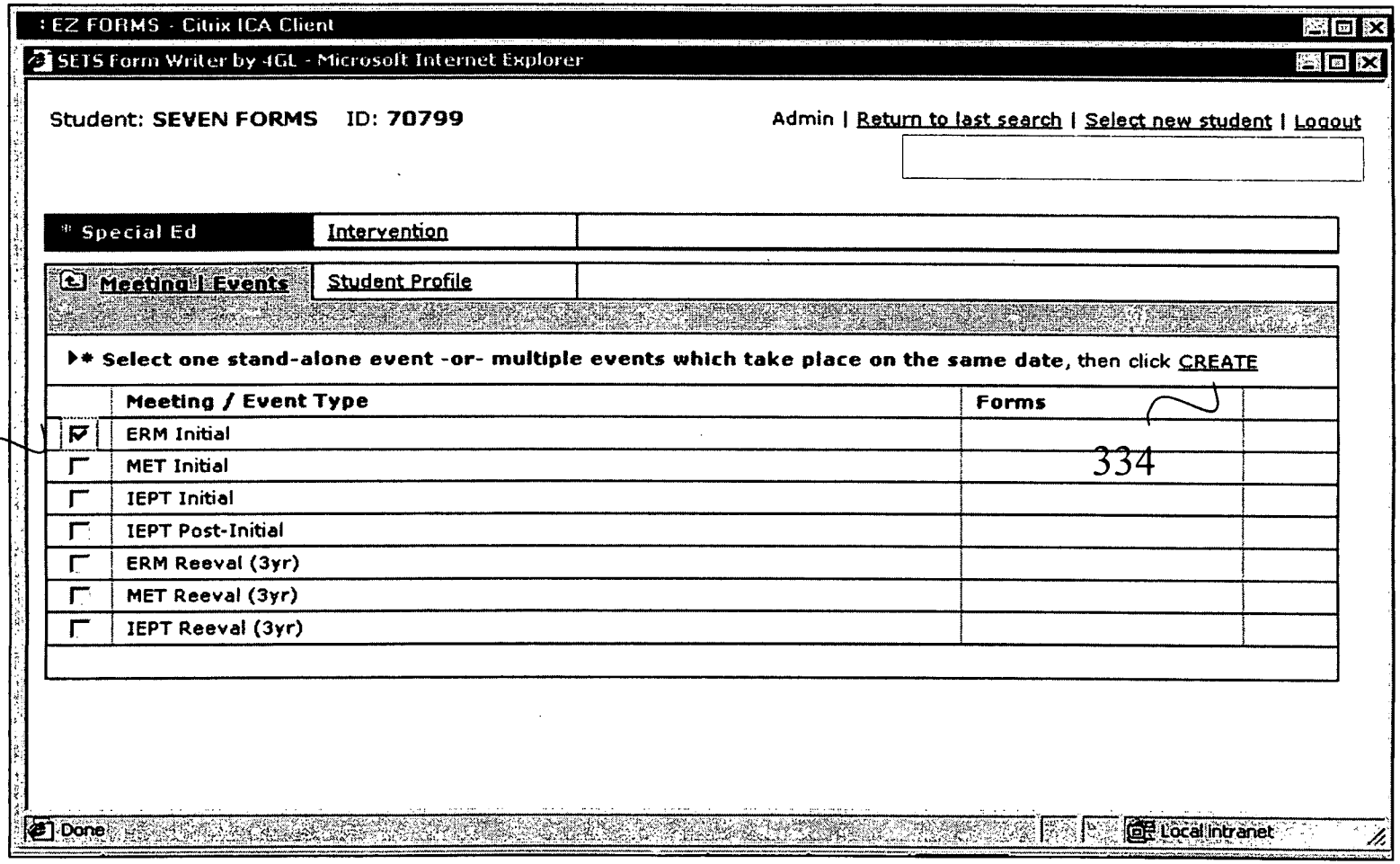

: EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
* Special Ed
Intervention
Meeting / Events
Student Profile
** Select one stand-alone event -or- multiple events which take place on the same date, then click CREATE
Meeting / Event Type
Forms
ERM Initial
MET Initial
IEPT Initial
IEPT Post-Initial
ERM Reeval (3yr)
MET Reeval (3yr)
IEPT Reeval (3yr)
Done
Local intranet
332
334

FIG. 26

330

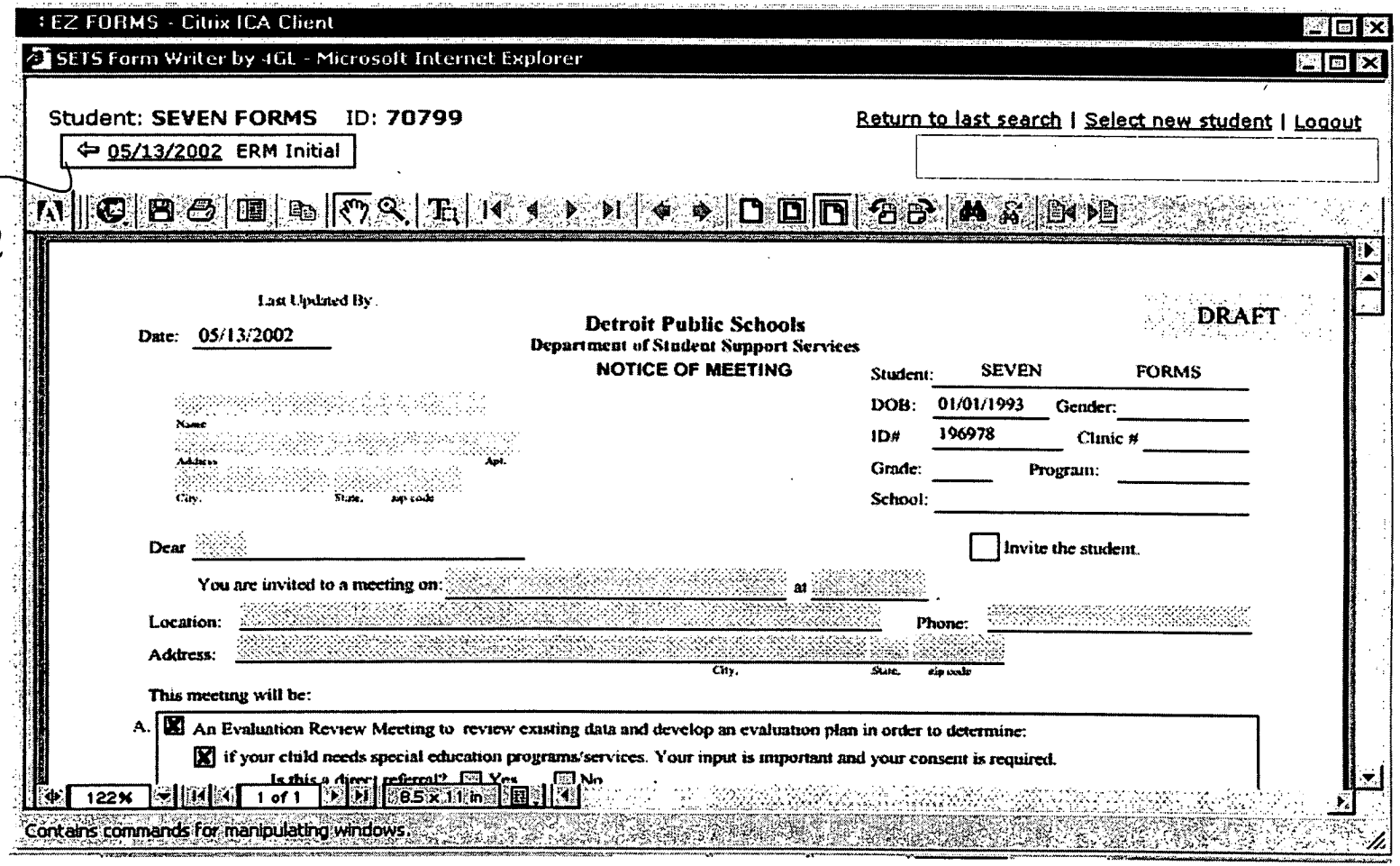

: EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Return to last search | Select new student | Logout
05/13/2002 ERM Initial
342
Last Updated By:
Date: 05/13/2002
Detroit Public Schools
Department of Student Support Services
NOTICE OF MEETING
DRAFT
Student: SEVEN FORMS
DOB: 01/01/1993 Gender:
ID# 196978 Clinic #
Grade: Program:
School:
Name
Address Apt.
City, State, zip code
Dear
Invite the student.
You are invited to a meeting on: at
Location: Phone:
Address: City, State, zip code
This meeting will be:
A. An Evaluation Review Meeting to review existing data and develop an evaluation plan in order to determine:
if your child needs special education programs/services. Your input is important and your consent is required.
Is this a direct referral? Yes No
122%
1 of 1
8.5 x 11 in
Contains commands for manipulating windows.

FIG. 27

340

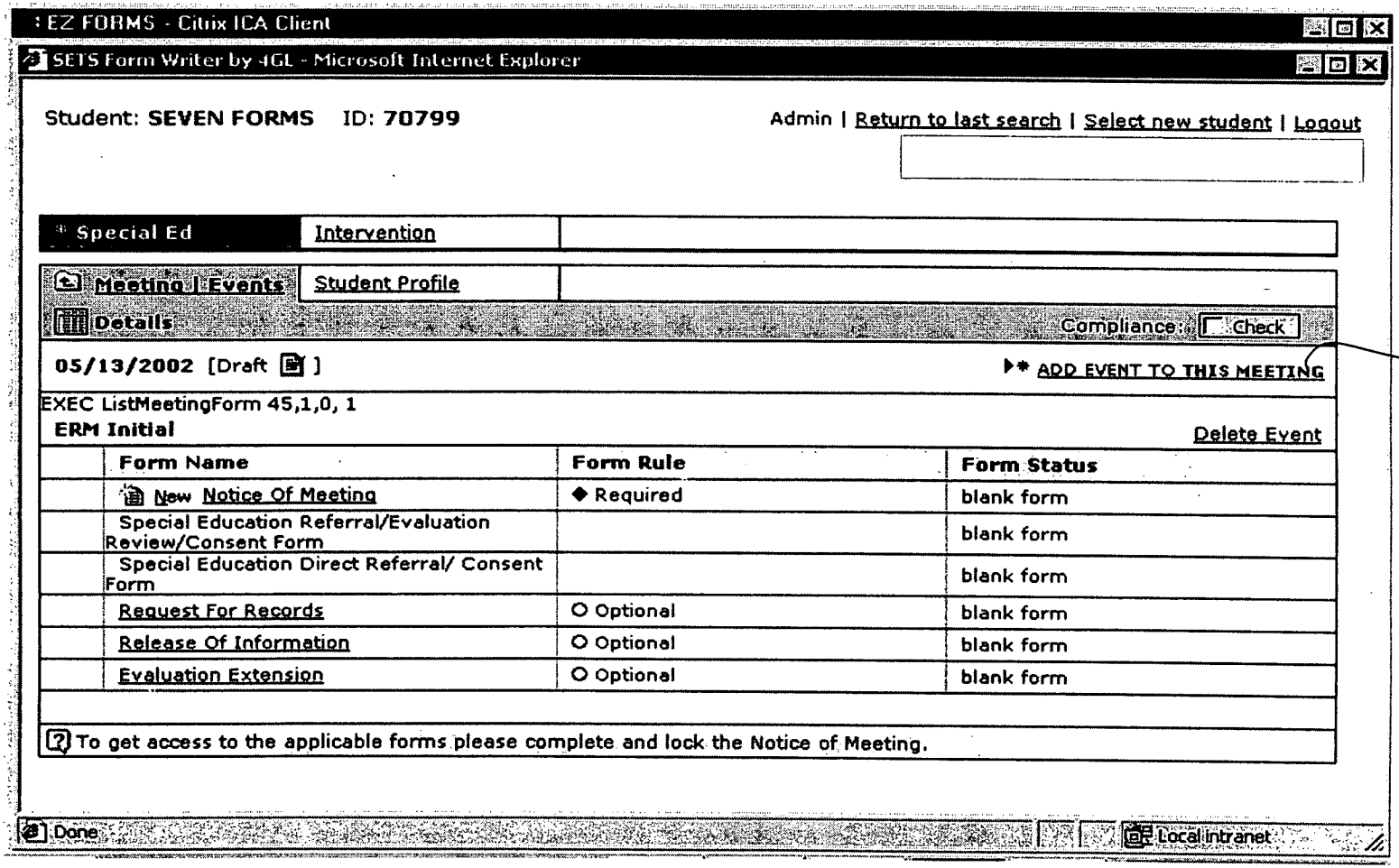

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
Special Ed
Intervention
Meeting / Events
Student Profile
Details
Compliance: Check
05/13/2002 [Draft]
ADD EVENT TO THIS MEETING
EXEC ListMeetingForm 45,1,0, 1
ERM Initial
Delete Event
Form Name
Form Rule
Form Status
New Notice Of Meeting
Required
blank form
Special Education Referral/Evaluation Review/Consent Form
blank form
Special Education Direct Referral/ Consent Form
blank form
Request For Records
Optional
blank form
Release Of Information
Optional
blank form
Evaluation Extension
Optional
blank form
To get access to the applicable forms please complete and lock the Notice of Meeting.
Done
Local intranet
352

FIG. 28

350

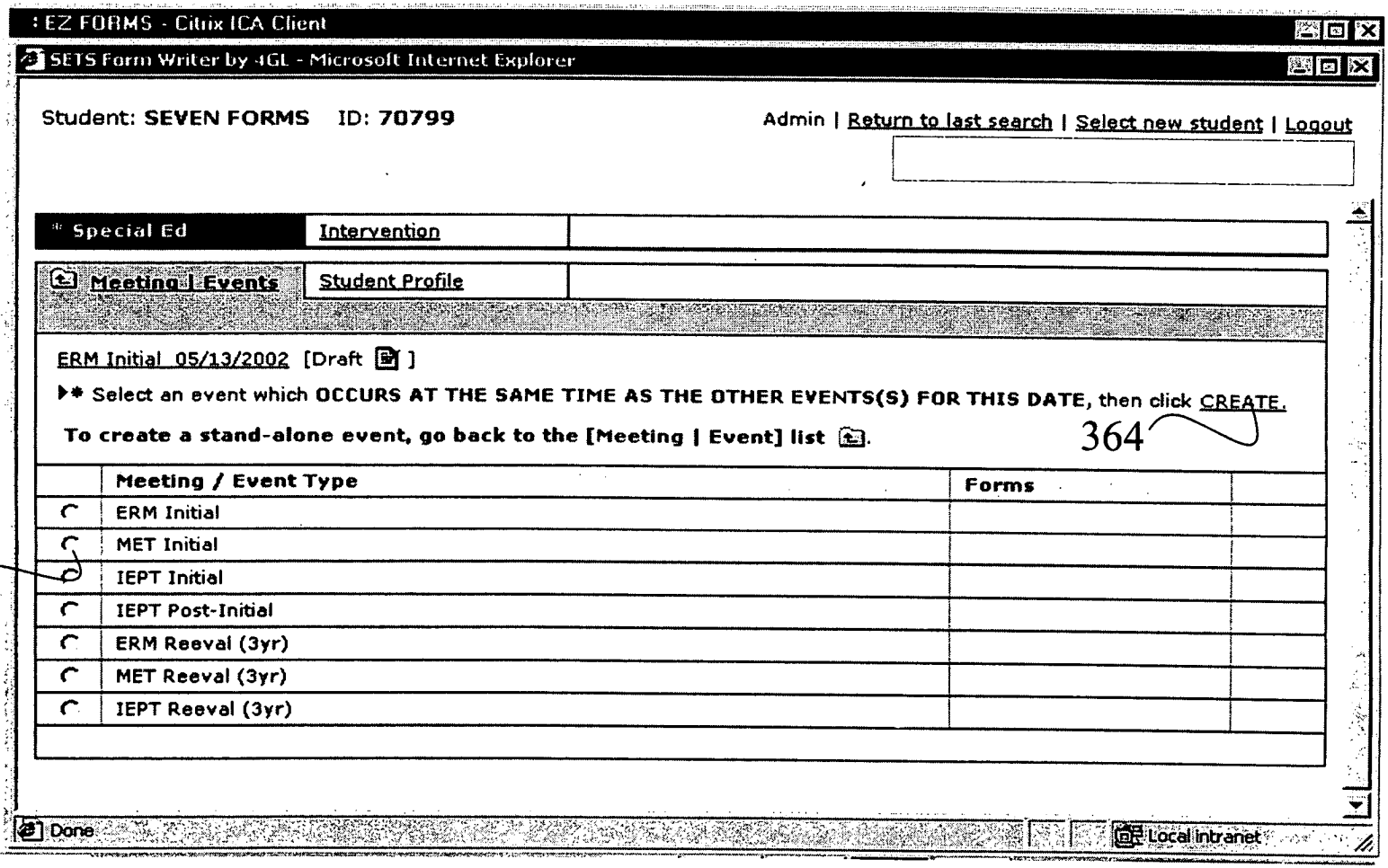
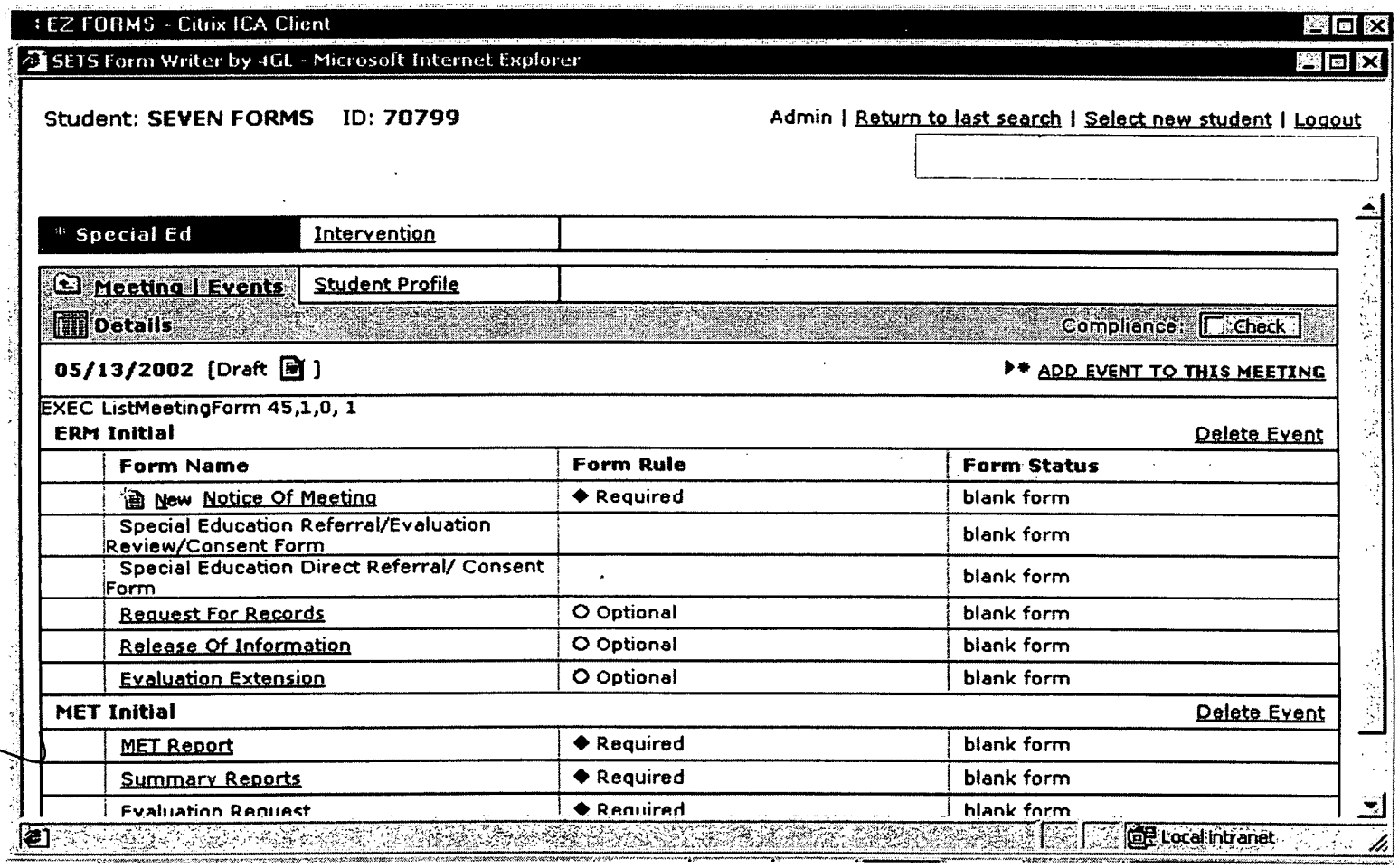

: EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
Special Ed
Intervention
Meeting | Events
Student Profile
ERM Initial 05/13/2002 [Draft]
Select an event which OCCURS AT THE SAME TIME AS THE OTHER EVENTS(S) FOR THIS DATE, then click CREATE.
To create a stand-alone event, go back to the [Meeting | Event] list.
364
Meeting / Event Type
Forms
ERM Initial
MET Initial
IEPT Initial
IEPT Post-Initial
ERM Reeval (3yr)
MET Reeval (3yr)
IEPT Reeval (3yr)
362
Done
Local intranet

FIG. 29

360



372

FIG. 30

370

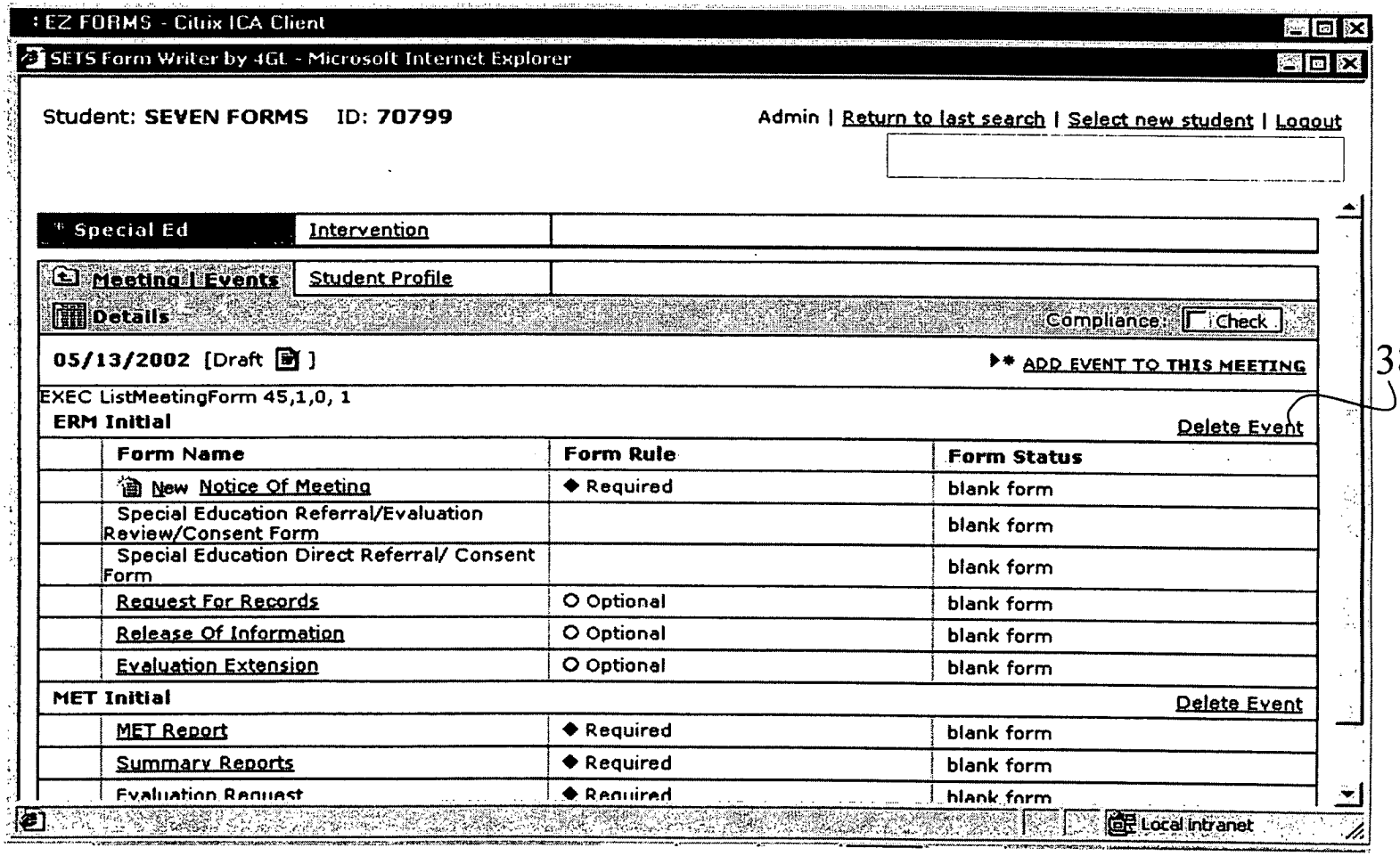

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
Special Ed
Intervention
Meeting | Events
Student Profile
Details
Compliance: Check
05/13/2002 [Draft]
ADD EVENT TO THIS MEETING
382
EXEC ListMeetingForm 45,1,0, 1
ERM Initial
Delete Event
Form Name
Form Rule
Form Status
New Notice Of Meeting
◆ Required
blank form
Special Education Referral/Evaluation Review/Consent Form
blank form
Special Education Direct Referral/ Consent Form
blank form
Request For Records
O Optional
blank form
Release Of Information
O Optional
blank form
Evaluation Extension
O Optional
blank form
MET Initial
Delete Event
MET Report
◆ Required
blank form
Summary Reports
◆ Required
blank form
Evaluation Request
◆ Required
blank form
Local intranet

FIG. 31

380

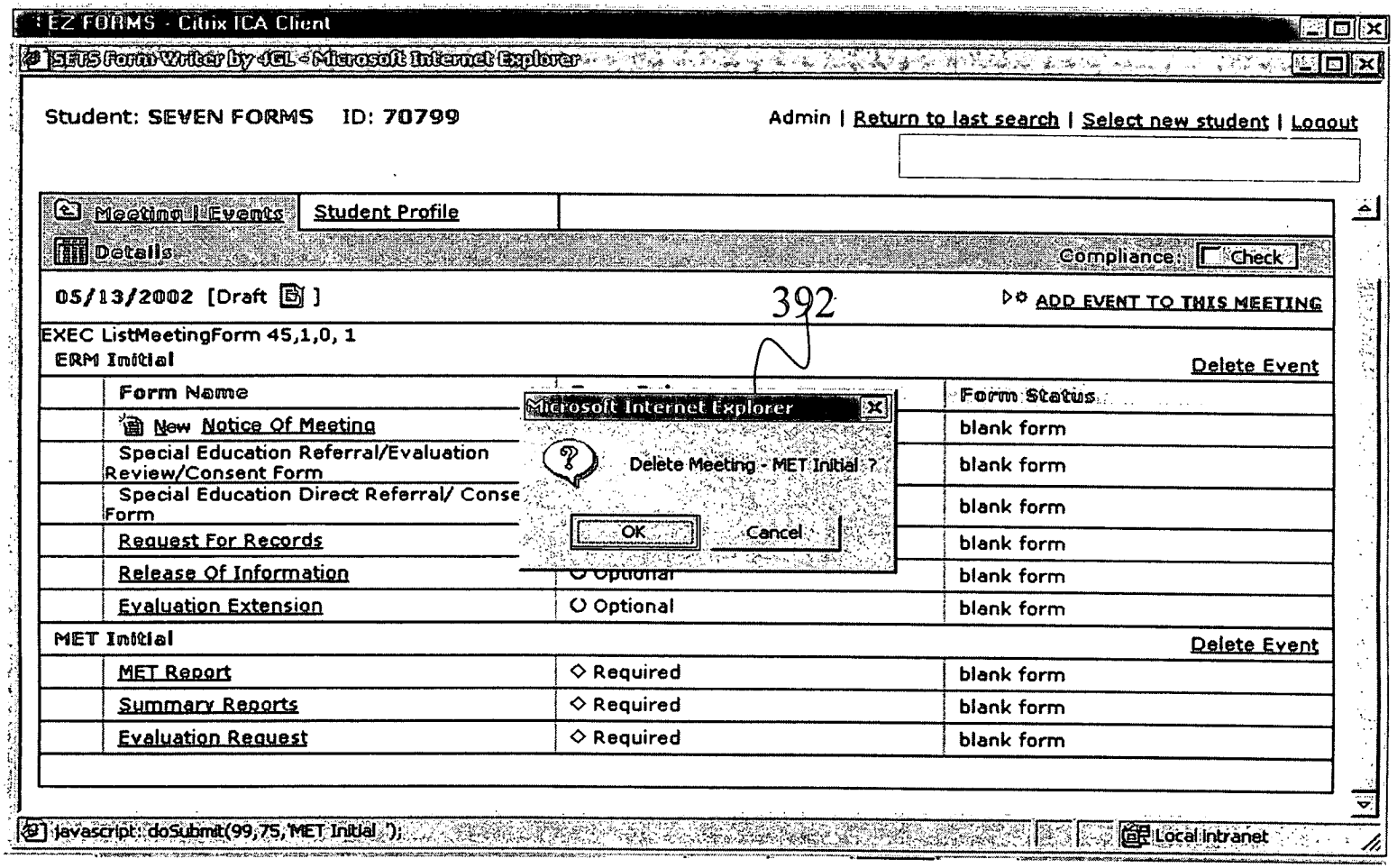

EZ FORMS - Citrix ICA Client
SFUS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
Meeting / Events
Student Profile
Details
Compliance: Check
05/13/2002 [Draft]
392
ADD EVENT TO THIS MEETING
EXEC ListMeetingForm 45,1,0, 1
ERM Initial
Delete Event
Form Name
Form Status
New Notice Of Meeting
blank form
Special Education Referral/Evaluation Review/Consent Form
blank form
Special Education Direct Referral/ Conse Form
blank form
Request For Records
blank form
Release Of Information
blank form
Evaluation Extension
Optional
blank form
MET Initial
Delete Event
MET Report
Required
blank form
Summary Reports
Required
blank form
Evaluation Request
Required
blank form
Microsoft Internet Explorer
Delete Meeting - MET Initial ?
OK
Cancel
javascript: doSubmit(99,75,'MET Initial ');
Local intranet

FIG. 32

390

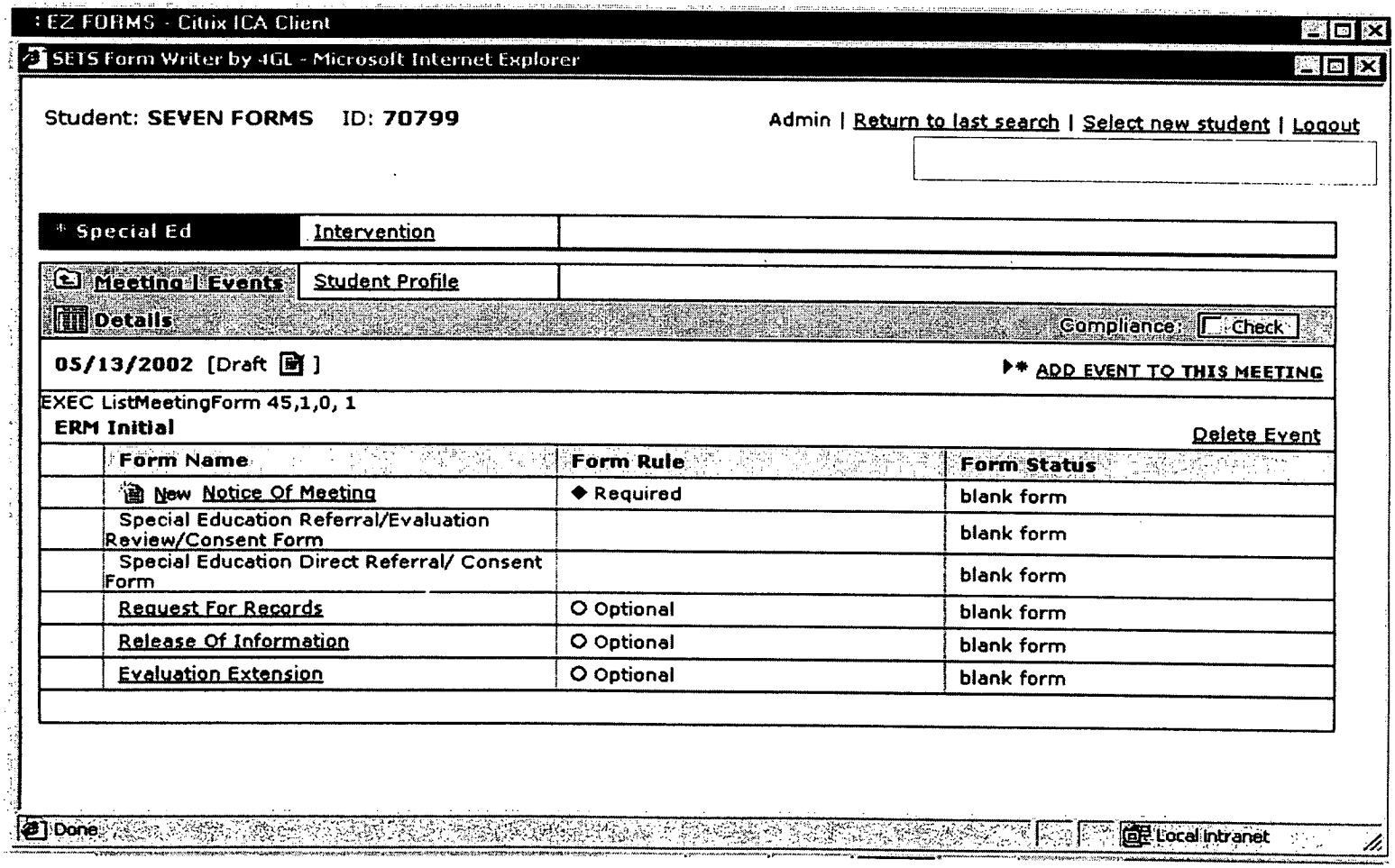

: EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout
Special Ed
Intervention
Meeting / Events
Student Profile
Details
Compliance: Check
05/13/2002 [Draft]
ADD EVENT TO THIS MEETING
EXEC ListMeetingForm 45,1,0, 1
ERM Initial
Delete Event
Form Name
Form Rule
Form Status
New Notice Of Meeting
Required
blank form
Special Education Referral/Evaluation Review/Consent Form
blank form
Special Education Direct Referral/ Consent Form
blank form
Request For Records
Optional
blank form
Release Of Information
Optional
blank form
Evaluation Extension
Optional
blank form
Done
Local Intranet

FIG. 33

400

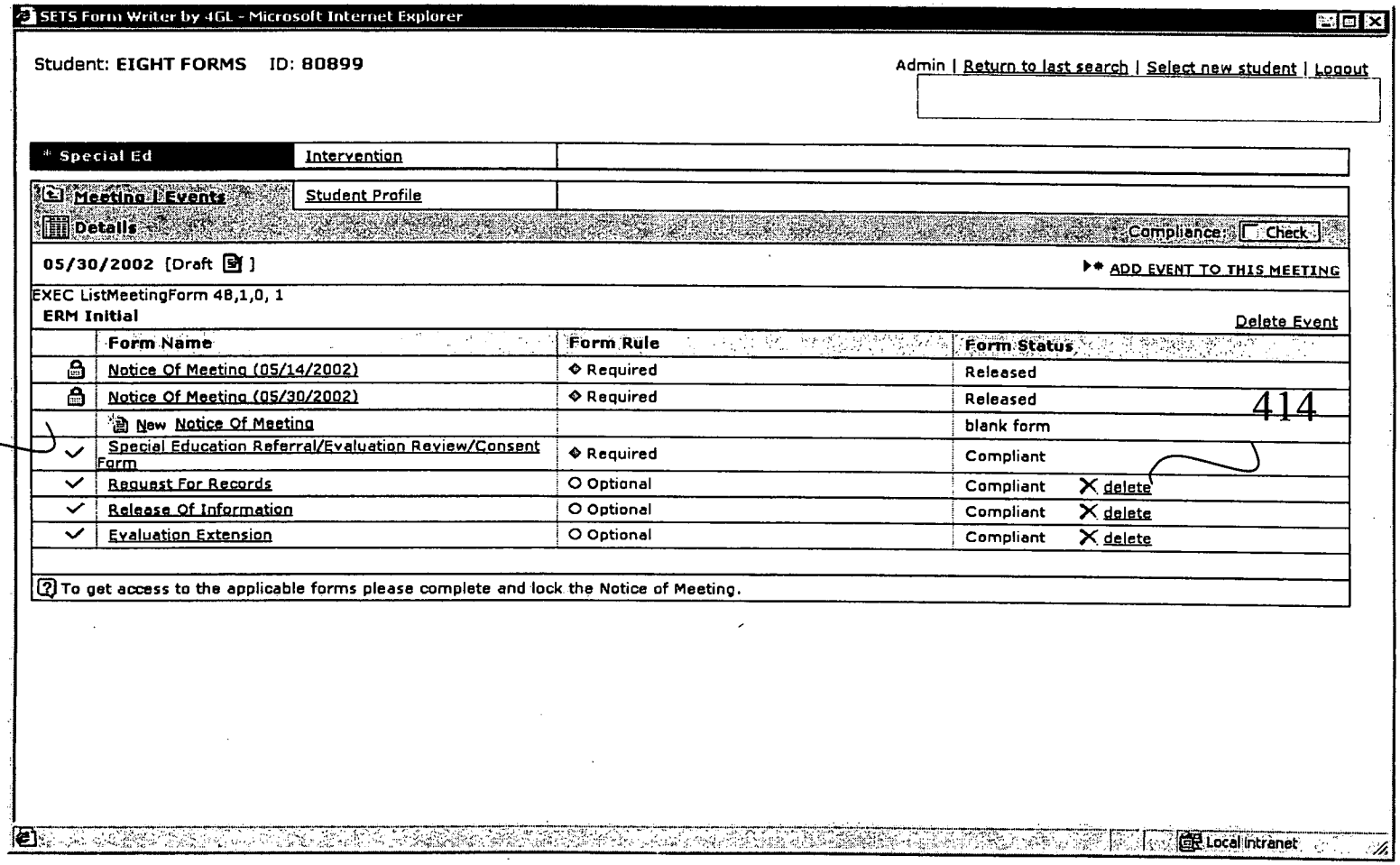
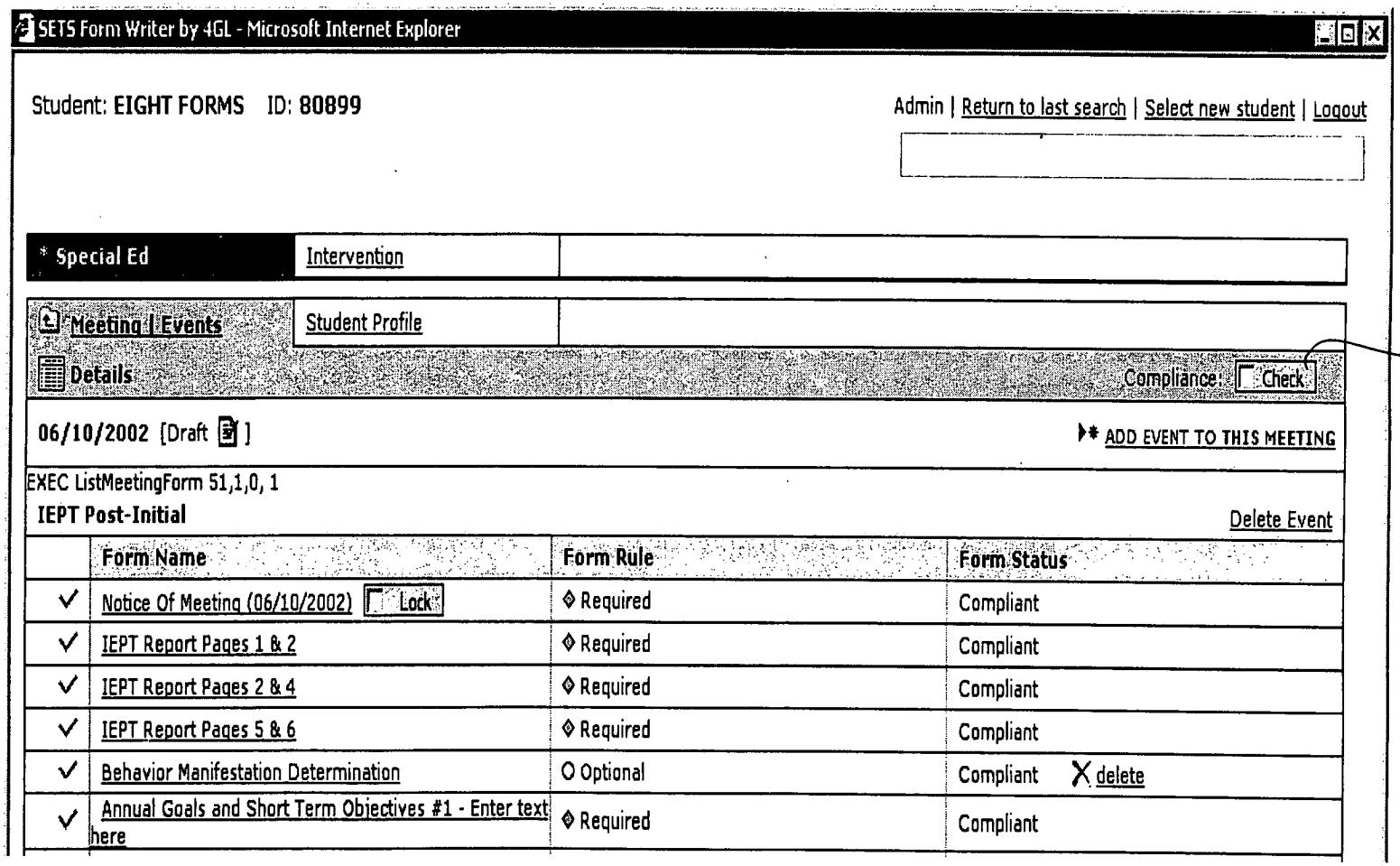

SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: EIGHT FORMS ID: 80899
Admin | Return to last search | Select new student | Logout
Special Ed
Intervention
Meeting | Events
Student Profile
Details
Compliance: Check
05/30/2002 [Draft]
ADD EVENT TO THIS MEETING
EXEC ListMeetingForm 48,1,0, 1
ERM Initial
Delete Event
Form Name
Form Rule
Form Status
Notice Of Meeting (05/14/2002)
Required
Released
Notice Of Meeting (05/30/2002)
Required
Released
New Notice Of Meeting
blank form
Special Education Referral/Evaluation Review/Consent Form
Required
Compliant
Request For Records
Optional
Compliant
delete
Release Of Information
Optional
Compliant
delete
Evaluation Extension
Optional
Compliant
delete
To get access to the applicable forms please complete and lock the Notice of Meeting.
Local intranet
412
414

FIG. 34

410



422

FIG. 35

420

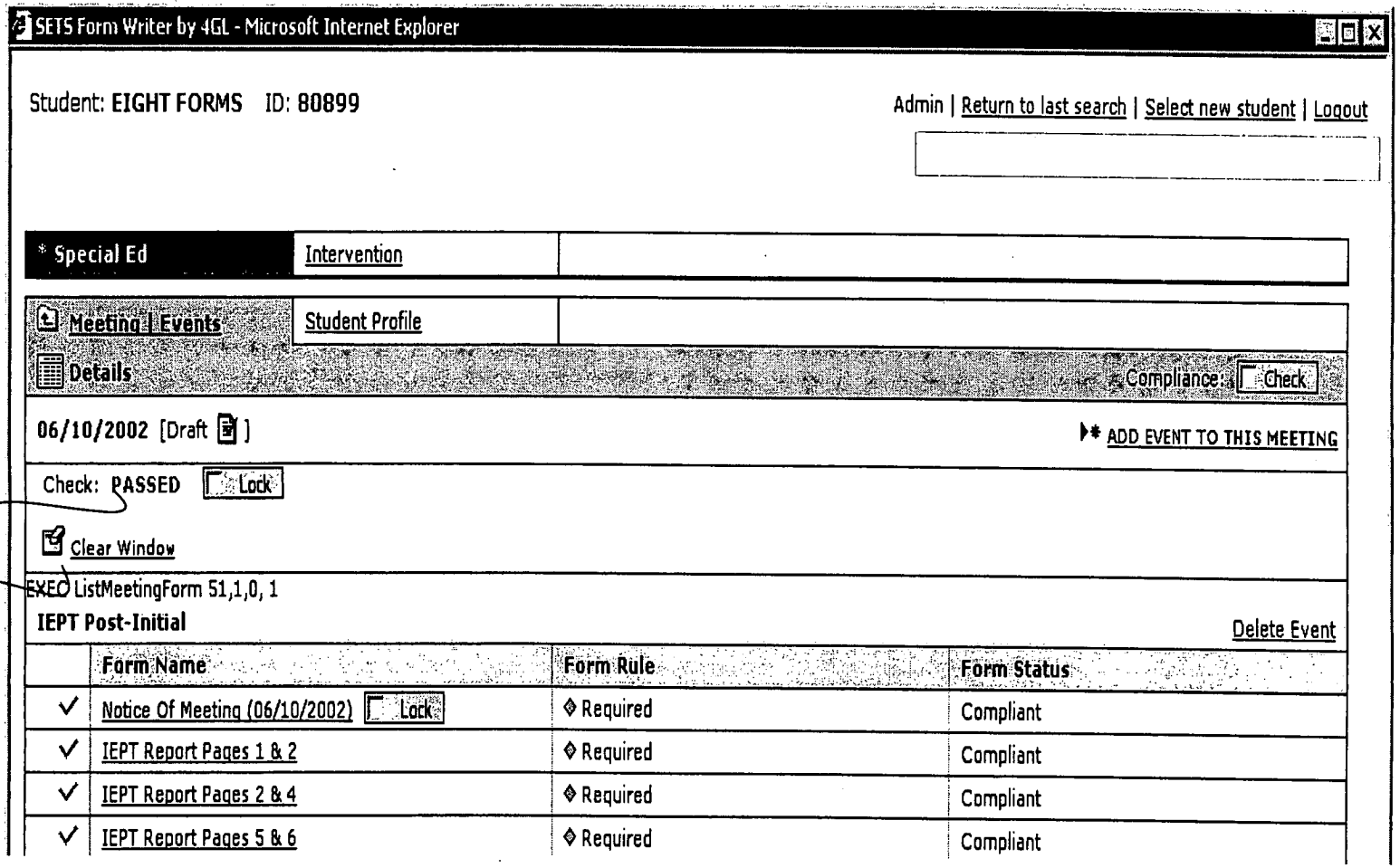

SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: EIGHT FORMS ID: 80899
Admin | Return to last search | Select new student | Logout
* Special Ed
Intervention
Meeting | Events
Student Profile
Details
Compliance: Check
06/10/2002 [Draft]
ADD EVENT TO THIS MEETING
Check: PASSED
Lock
Clear Window
EXEC ListMeetingForm 51,1,0, 1
IEPT Post-Initial
Delete Event
Form Name
Form Rule
Form Status
Notice Of Meeting (06/10/2002) Lock
Required
Compliant
IEPT Report Pages 1 & 2
Required
Compliant
IEPT Report Pages 2 & 4
Required
Compliant
IEPT Report Pages 5 & 6
Required
Compliant
432
434

FIG. 36

430

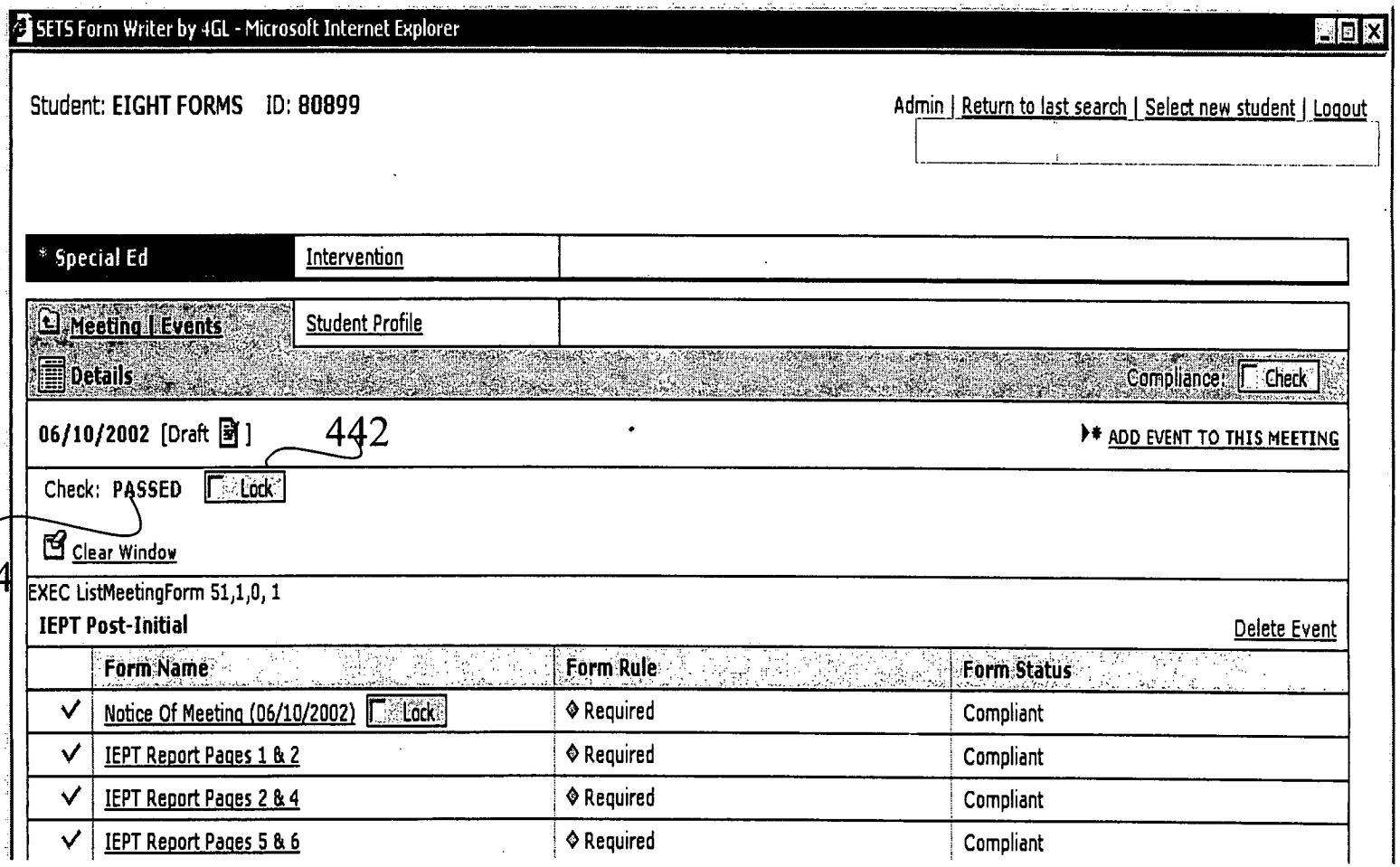

SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: EIGHT FORMS ID: 80899
Admin | Return to last search | Select new student | Logout
* Special Ed
Intervention
Meeting | Events
Student Profile
Details
Compliance: Check
06/10/2002 [Draft]
442
ADD EVENT TO THIS MEETING
Check: PASSED
Lock
Clear Window
444
EXEC ListMeetingForm 51,1,0, 1
IEPT Post-Initial
Delete Event
Form Name
Form Rule
Form Status
Notice Of Meeting (06/10/2002)
Lock
Required
Compliant
IEPT Report Pages 1 & 2
Required
Compliant
IEPT Report Pages 2 & 4
Required
Compliant
IEPT Report Pages 5 & 6
Required
Compliant

FIG. 37

440

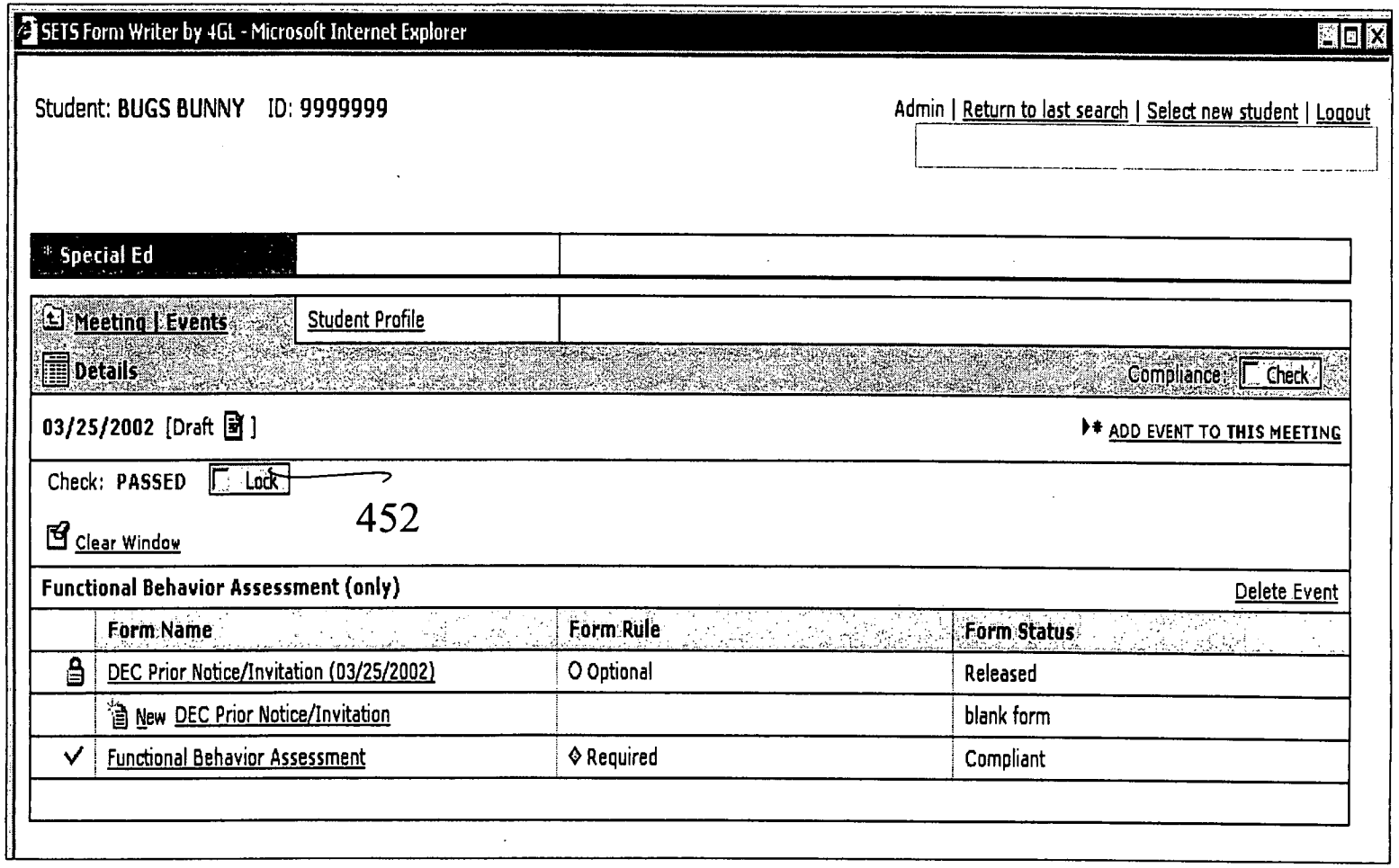

SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: BUGS BUNNY ID: 9999999
Admin | Return to last search | Select new student | Logout
* Special Ed
Meeting | Events
Student Profile
Details
Compliance: Check
03/25/2002 [Draft]
ADD EVENT TO THIS MEETING
Check: PASSED
Lock
452
Clear Window
Functional Behavior Assessment (only)
Delete Event
Form Name
Form Rule
Form Status
DEC Prior Notice/Invitation (03/25/2002)
O Optional
Released
New DEC Prior Notice/Invitation
blank form
Functional Behavior Assessment
◊ Required
Compliant

FIG. 38

450

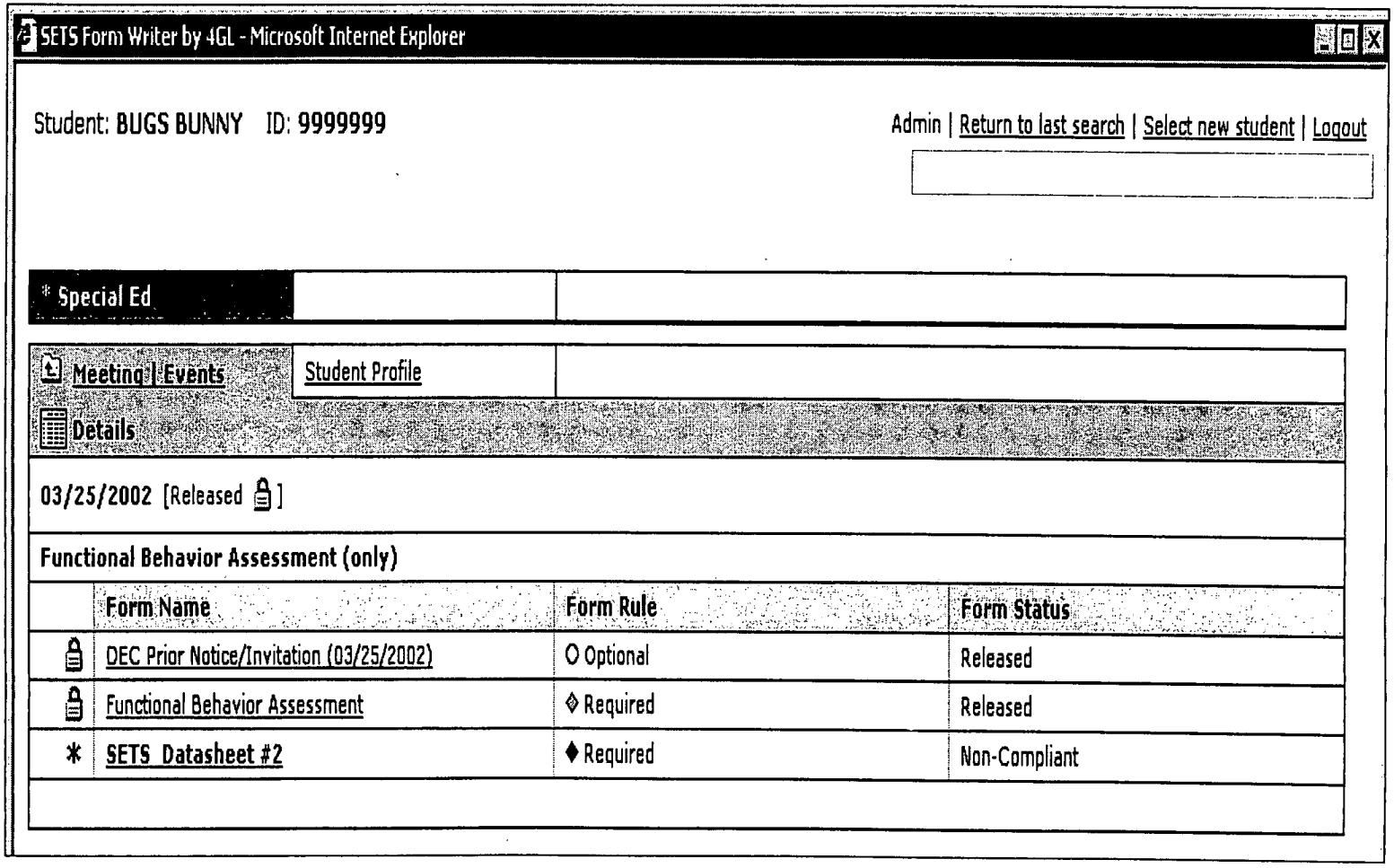

SETS Form Writer by 4GL - Microsoft Internet Explorer
Student: BUGS BUNNY ID: 9999999
Admin | Return to last search | Select new student | Logout
* Special Ed
Meeting | Events
Student Profile
Details
03/25/2002 [Released]
Functional Behavior Assessment (only)
Form Name
Form Rule
Form Status
DEC Prior Notice/Invitation (03/25/2002)
O Optional
Released
Functional Behavior Assessment
◈ Required
Released
SETS Datasheet #2
♦ Required
Non-Compliant

FIG. 39

460

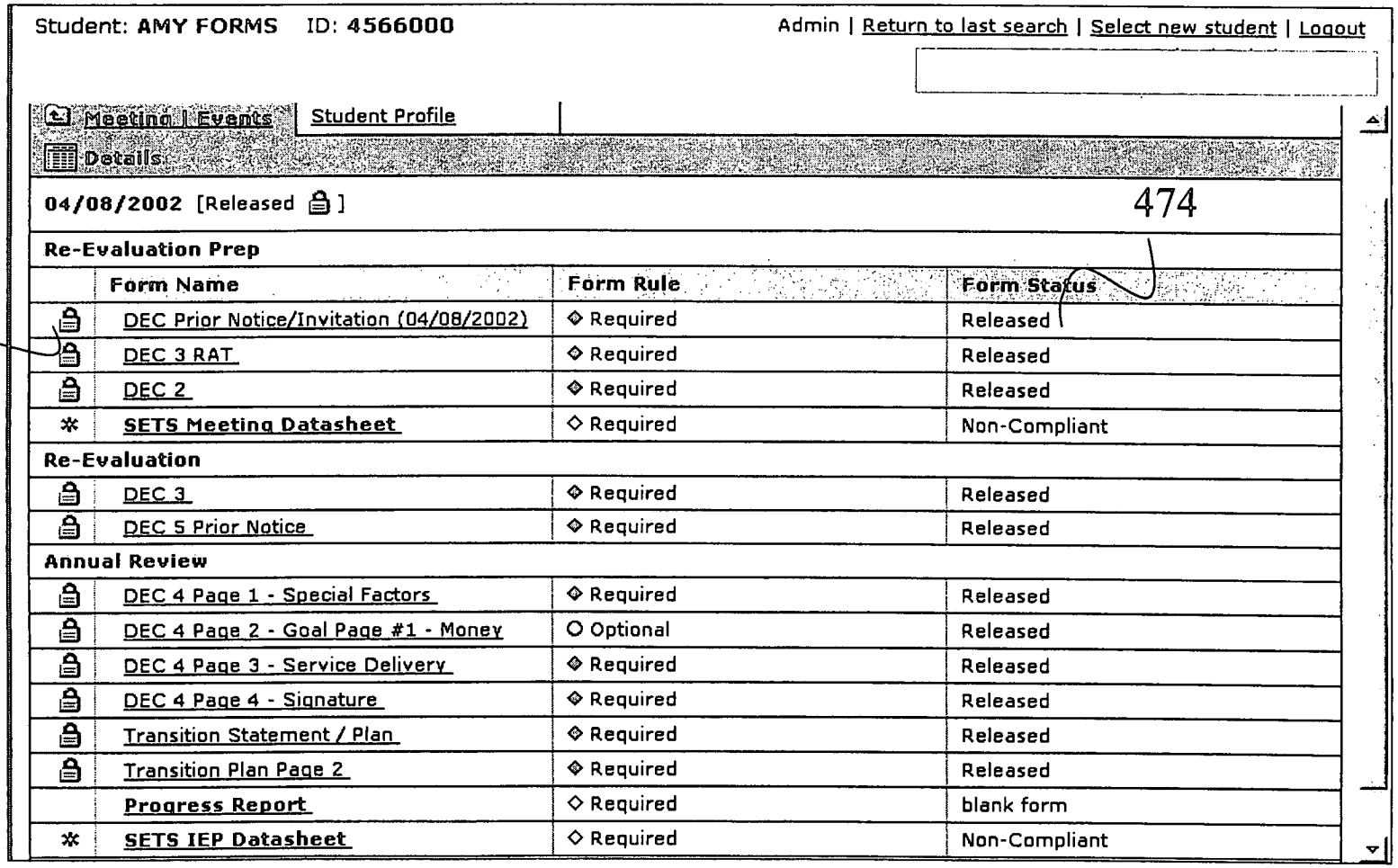

Student: AMY FORMS ID: 4566000
Admin | Return to last search | Select new student | Logout
Meeting | Events
Student Profile
Details
04/08/2002 [Released]
474
Re-Evaluation Prep
Form Name
Form Rule
Form Status
DEC Prior Notice/Invitation (04/08/2002) Required Released
DEC 3 RAT Required Released
DEC 2 Required Released
SETS Meeting Datasheet Required Non-Compliant
Re-Evaluation
DEC 3 Required Released
DEC 5 Prior Notice Required Released
Annual Review
DEC 4 Page 1 - Special Factors Required Released
DEC 4 Page 2 - Goal Page #1 - Money Optional Released
DEC 4 Page 3 - Service Delivery Required Released
DEC 4 Page 4 - Signature Required Released
Transition Statement / Plan Required Released
Transition Plan Page 2 Required Released
Progress Report Required blank form
SETS IEP Datasheet Required Non-Compliant
472

FIG. 40

470

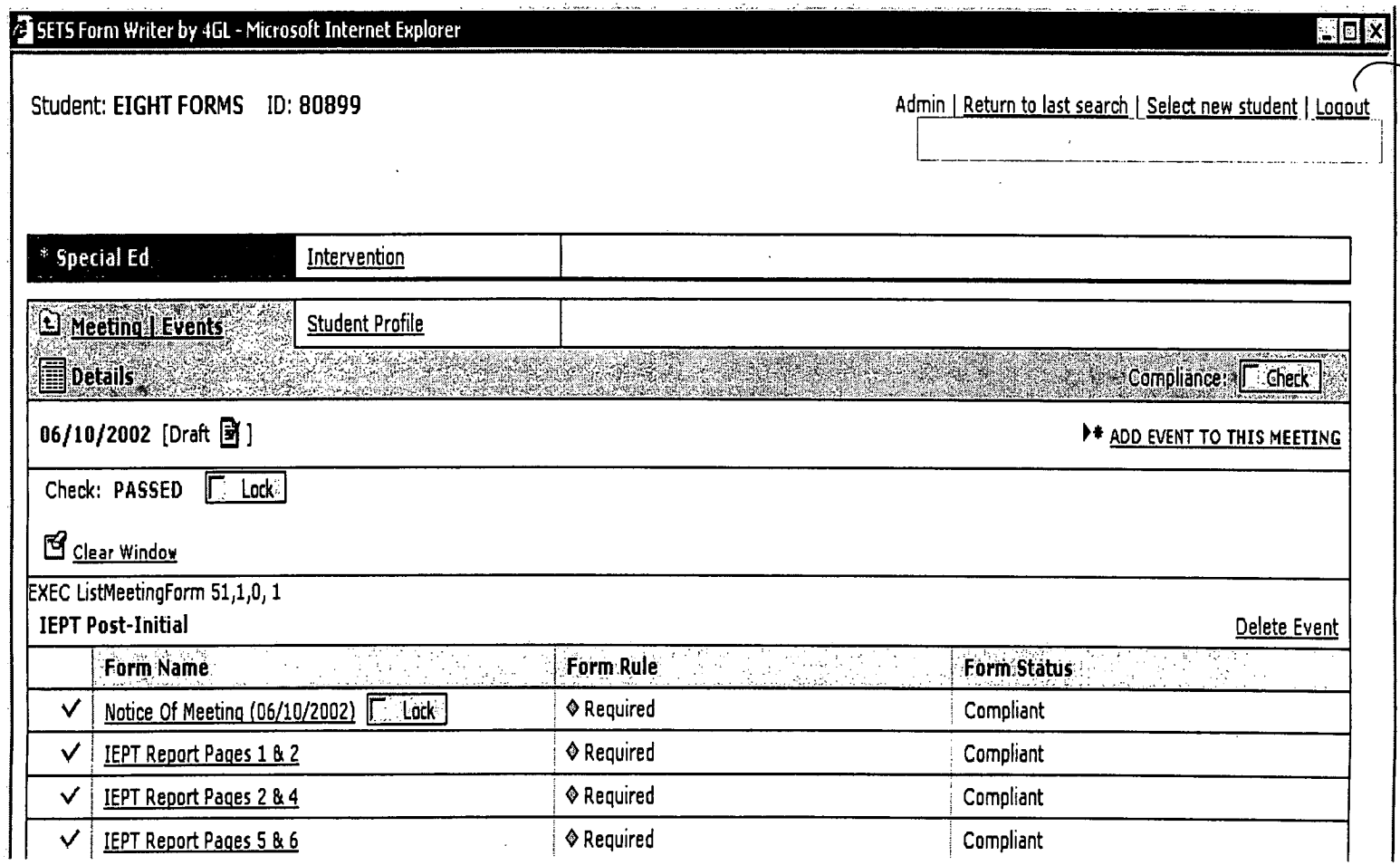

SETS Form Writer by 4GL - Microsoft Internet Explorer
482
Student: EIGHT FORMS ID: 80899
Admin | Return to last search | Select new student | Logout
* Special Ed
Intervention
Meeting | Events
Student Profile
Details
Compliance: Check
06/10/2002 [Draft]
ADD EVENT TO THIS MEETING
Check: PASSED Lock
Clear Window
EXEC ListMeetingForm 51,1,0, 1
IEPT Post-Initial
Delete Event
Form Name
Form Rule
Form Status
Notice Of Meeting (06/10/2002) Lock
Required
Compliant
IEPT Report Pages 1 & 2
Required
Compliant
IEPT Report Pages 2 & 4
Required
Compliant
IEPT Report Pages 5 & 6
Required
Compliant

FIG. 41

480

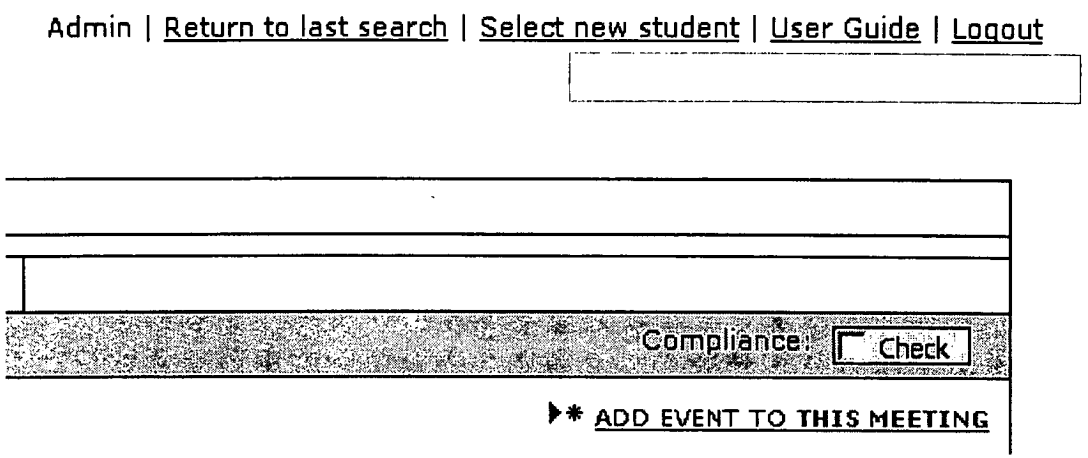

Admin | Return to last search | Select new student | User Guide | Logout
Compliance
Check
ADD EVENT TO THIS MEETING

FIG. 42

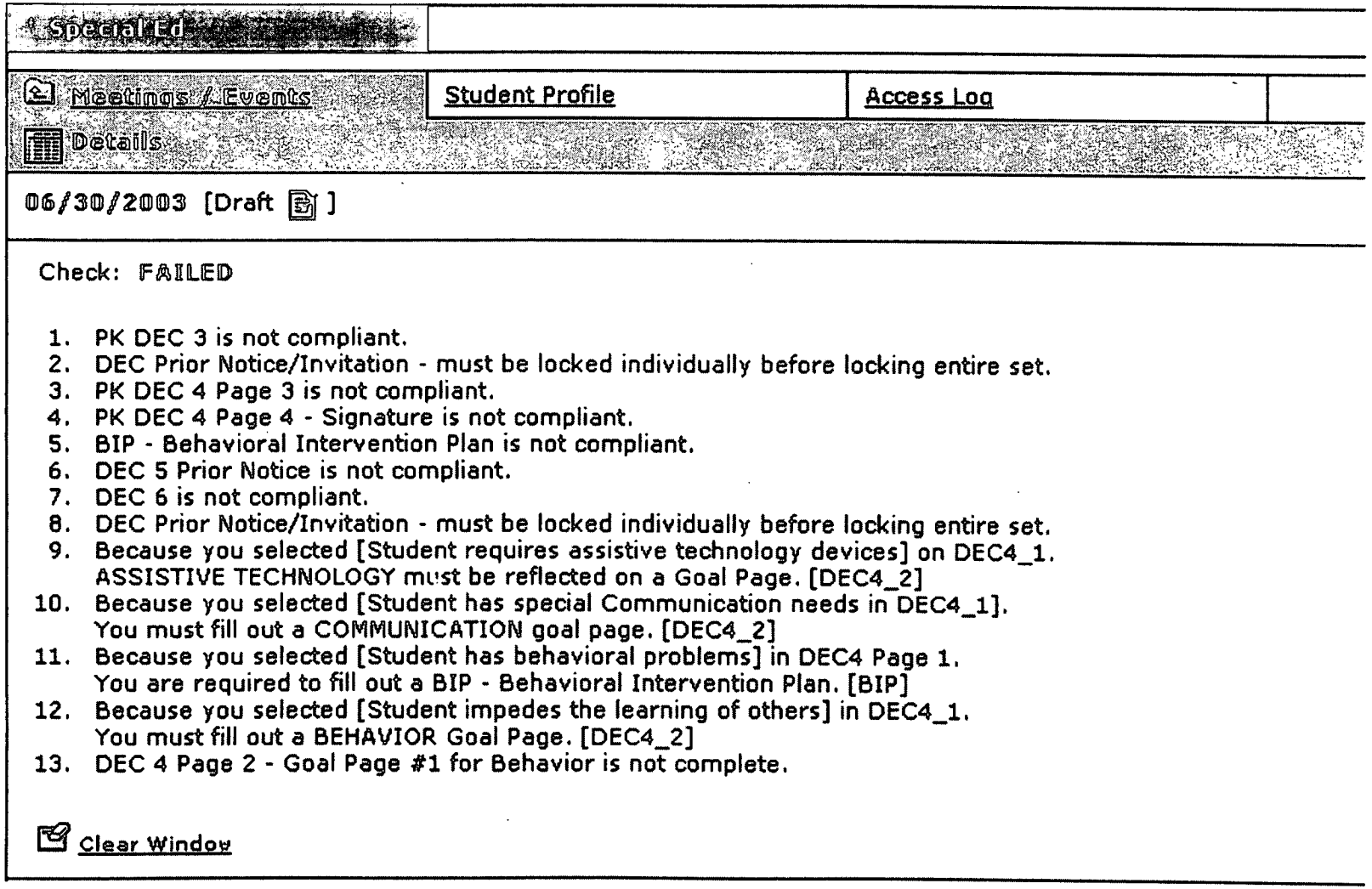

Special Ed
Meetings / Events
Student Profile
Access Log
Details
06/30/2003 [Draft]
Check: FAILED
1. PK DEC 3 is not compliant.
2. DEC Prior Notice/Invitation - must be locked individually before locking entire set.
3. PK DEC 4 Page 3 is not compliant.
4. PK DEC 4 Page 4 - Signature is not compliant.
5. BIP - Behavioral Intervention Plan is not compliant.
6. DEC 5 Prior Notice is not compliant.
7. DEC 6 is not compliant.
8. DEC Prior Notice/Invitation - must be locked individually before locking entire set.
9. Because you selected [Student requires assistive technology devices] on DEC4_1. ASSISTIVE TECHNOLOGY must be reflected on a Goal Page. [DEC4_2]
10. Because you selected [Student has special Communication needs in DEC4_1]. You must fill out a COMMUNICATION goal page. [DEC4_2]
11. Because you selected [Student has behavioral problems] in DEC4 Page 1. You are required to fill out a BIP - Behavioral Intervention Plan. [BIP]
12. Because you selected [Student impedes the learning of others] in DEC4_1. You must fill out a BEHAVIOR Goal Page. [DEC4_2]
13. DEC 4 Page 2 - Goal Page #1 for Behavior is not complete.
Clear Window

FIG. 43

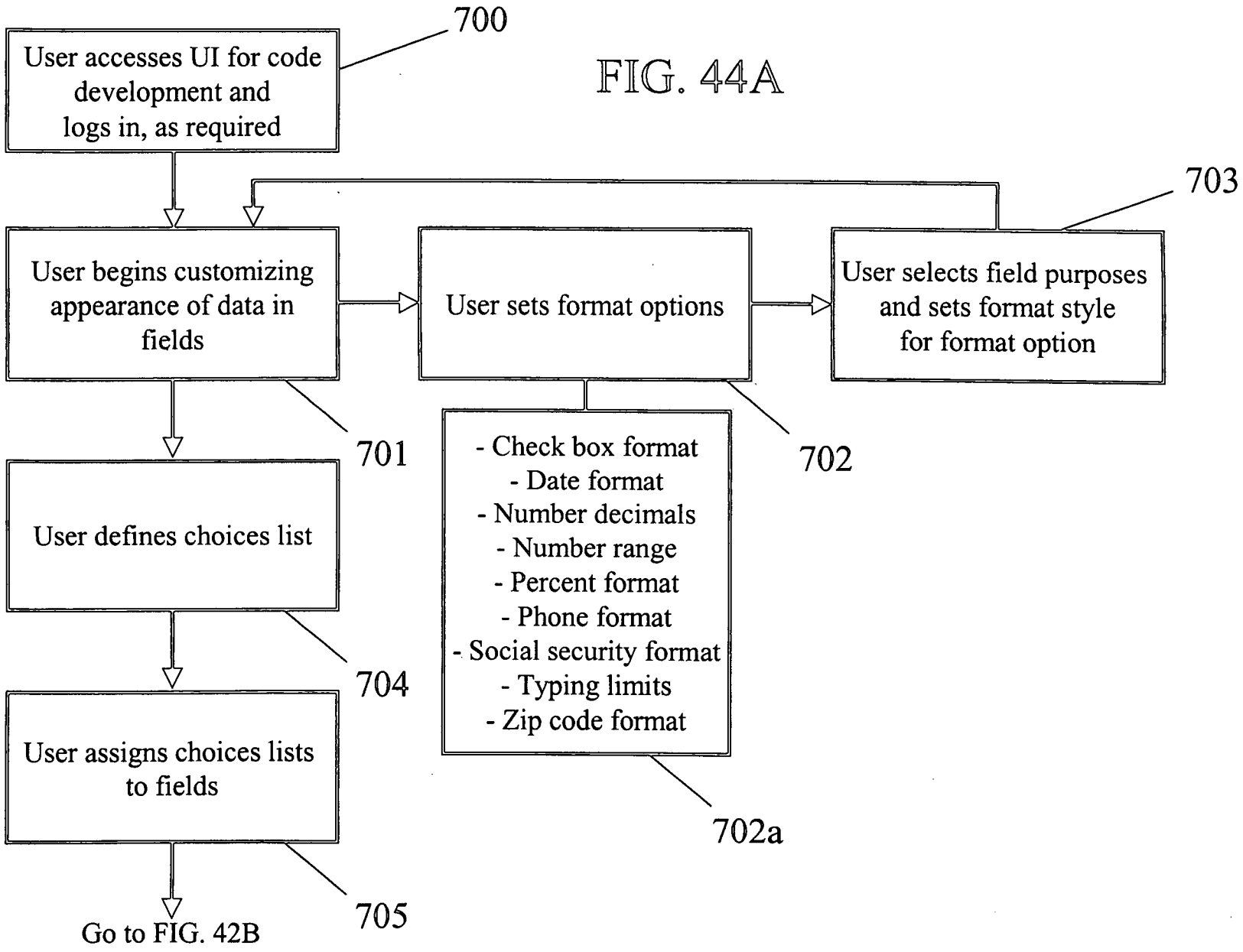

User accesses UI for code development and logs in, as required
700
User begins customizing appearance of data in fields
User sets format options
User selects field purposes and sets format style for format option
703
701
702
User defines choices list
- Check box format
- Date format
- Number decimals
- Number range
- Percent format
- Phone format
- Social security format
- Typing limits
- Zip code format
704
User assigns choices lists to fields
702a
705
Go to FIG. 42B

FIG. 44A

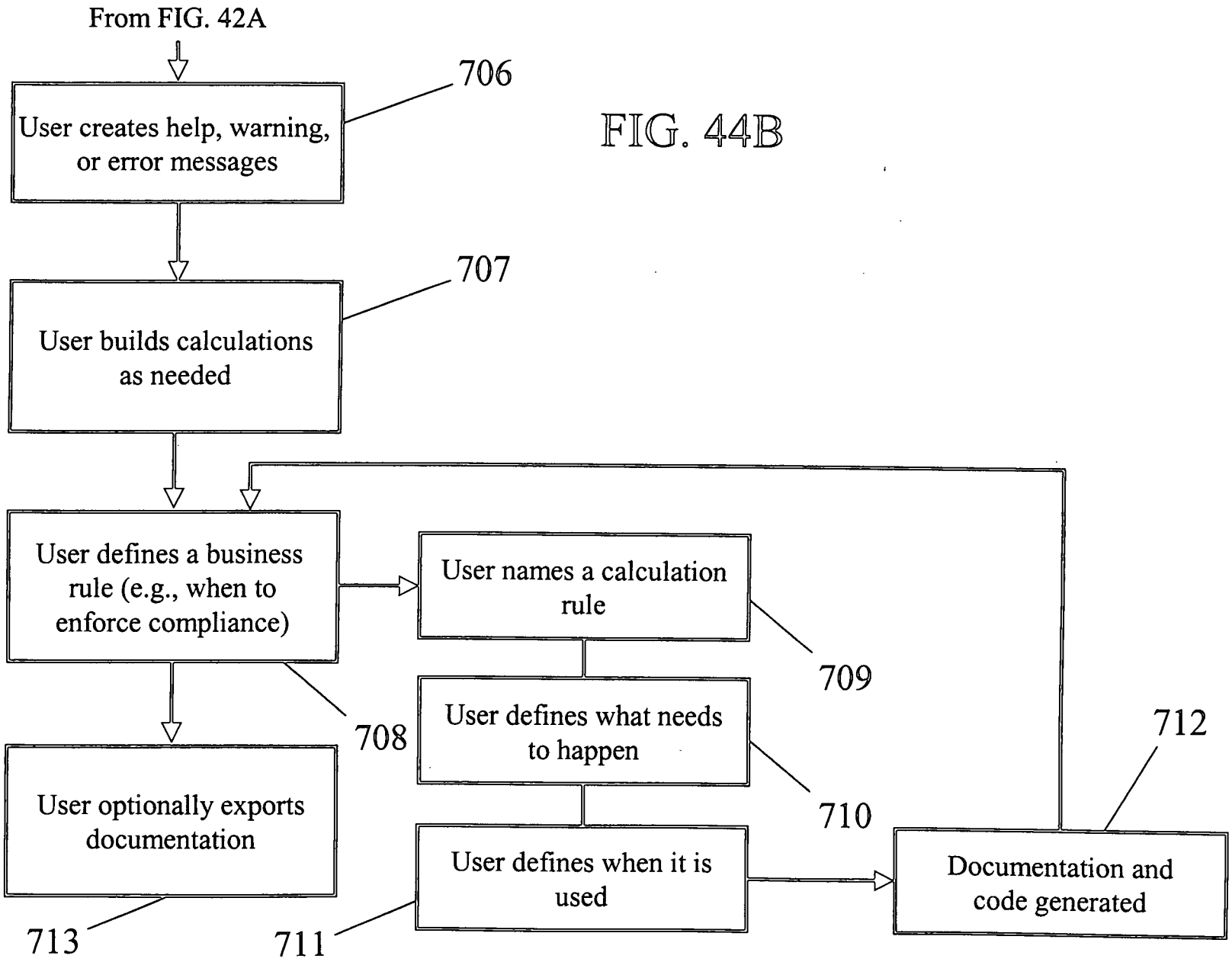

From FIG. 42A
User creates help, warning, or error messages
706
User builds calculations as needed
707
User defines a business rule (e.g., when to enforce compliance)
User names a calculation rule
709
User defines what needs to happen
710
User defines when it is used
711
User optionally exports documentation
713
708
Documentation and code generated
712

FIG. 44B

FIG. 45

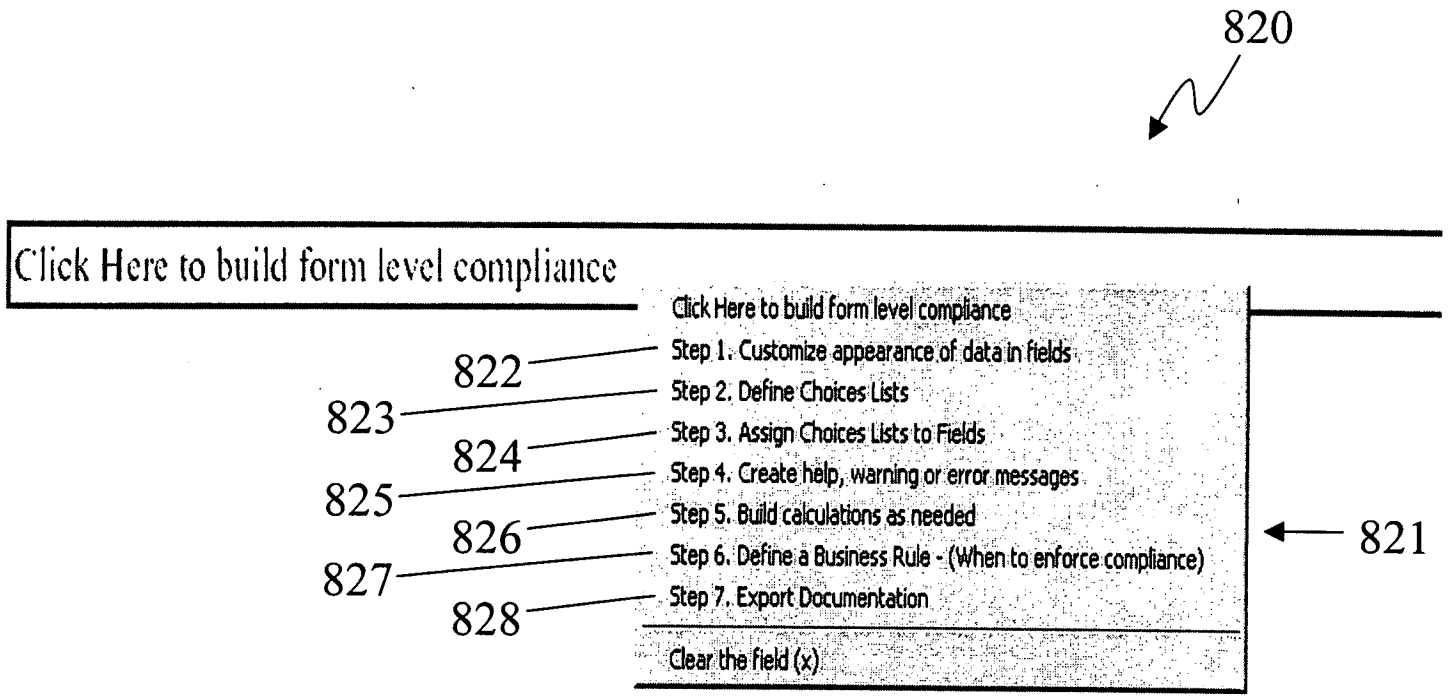

820
Click Here to build form level compliance
Click Here to build form level compliance
Step 1. Customize appearance of data in fields
Step 2. Define Choices Lists
Step 3. Assign Choices Lists to Fields
Step 4. Create help, warning or error messages
Step 5. Build calculations as needed
Step 6. Define a Business Rule - (When to enforce compliance)
Step 7. Export Documentation
Clear the field (x)
822
823
824
825
826
827
828
821

FIG. 46

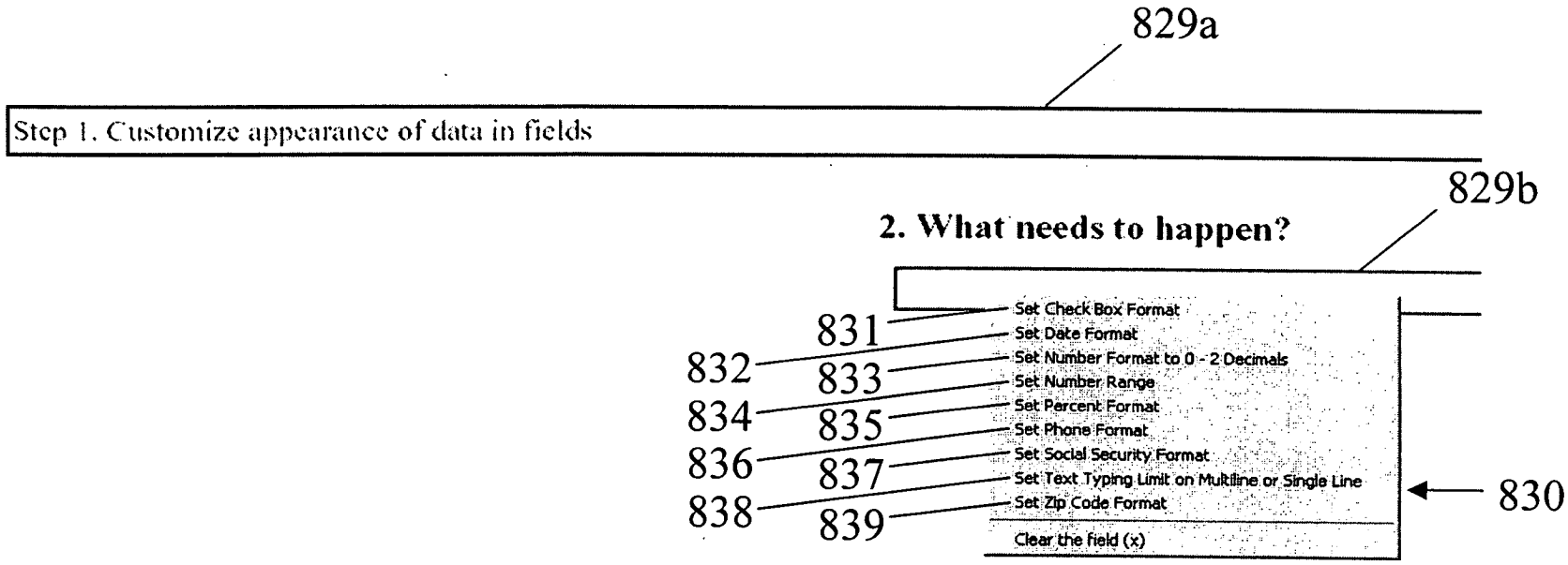
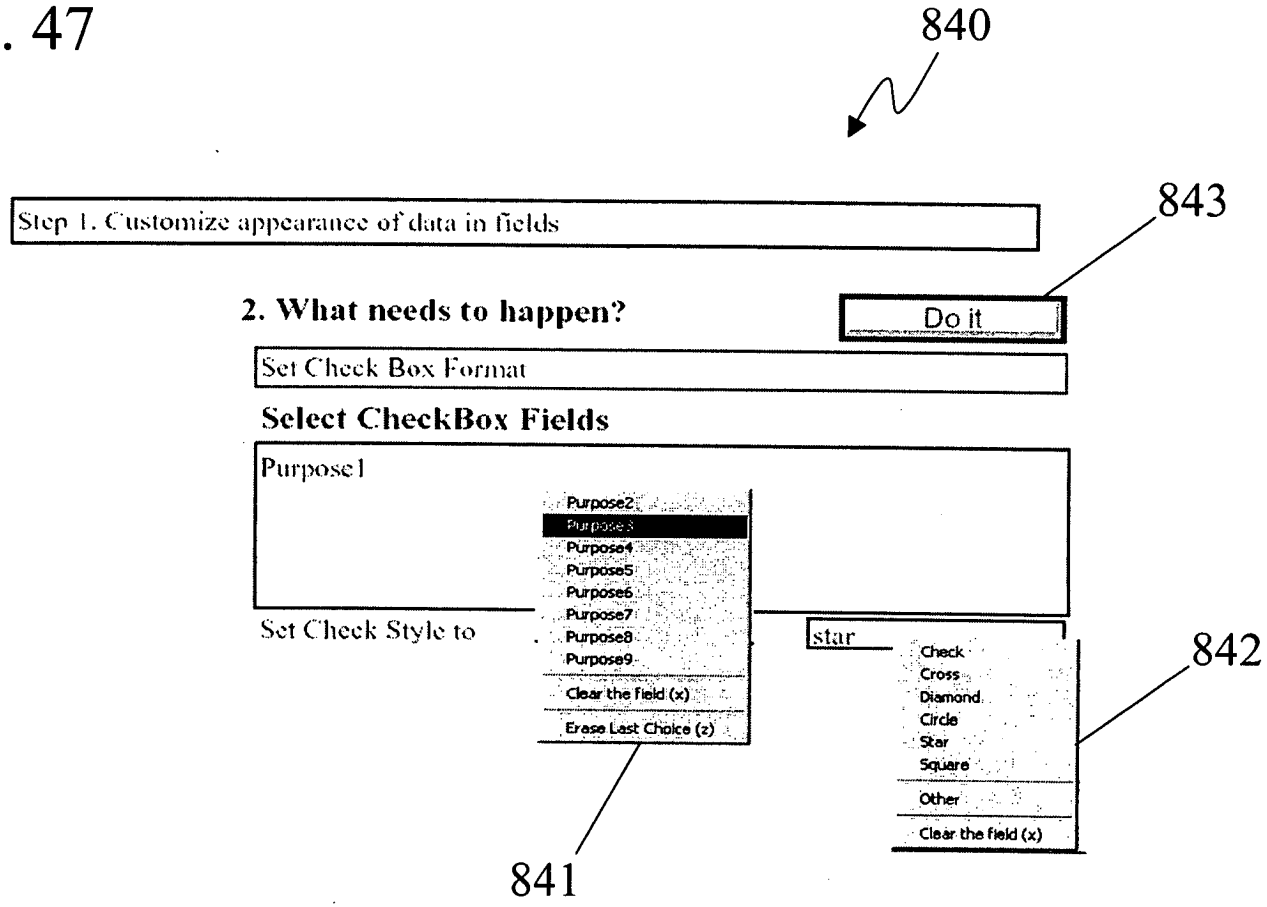
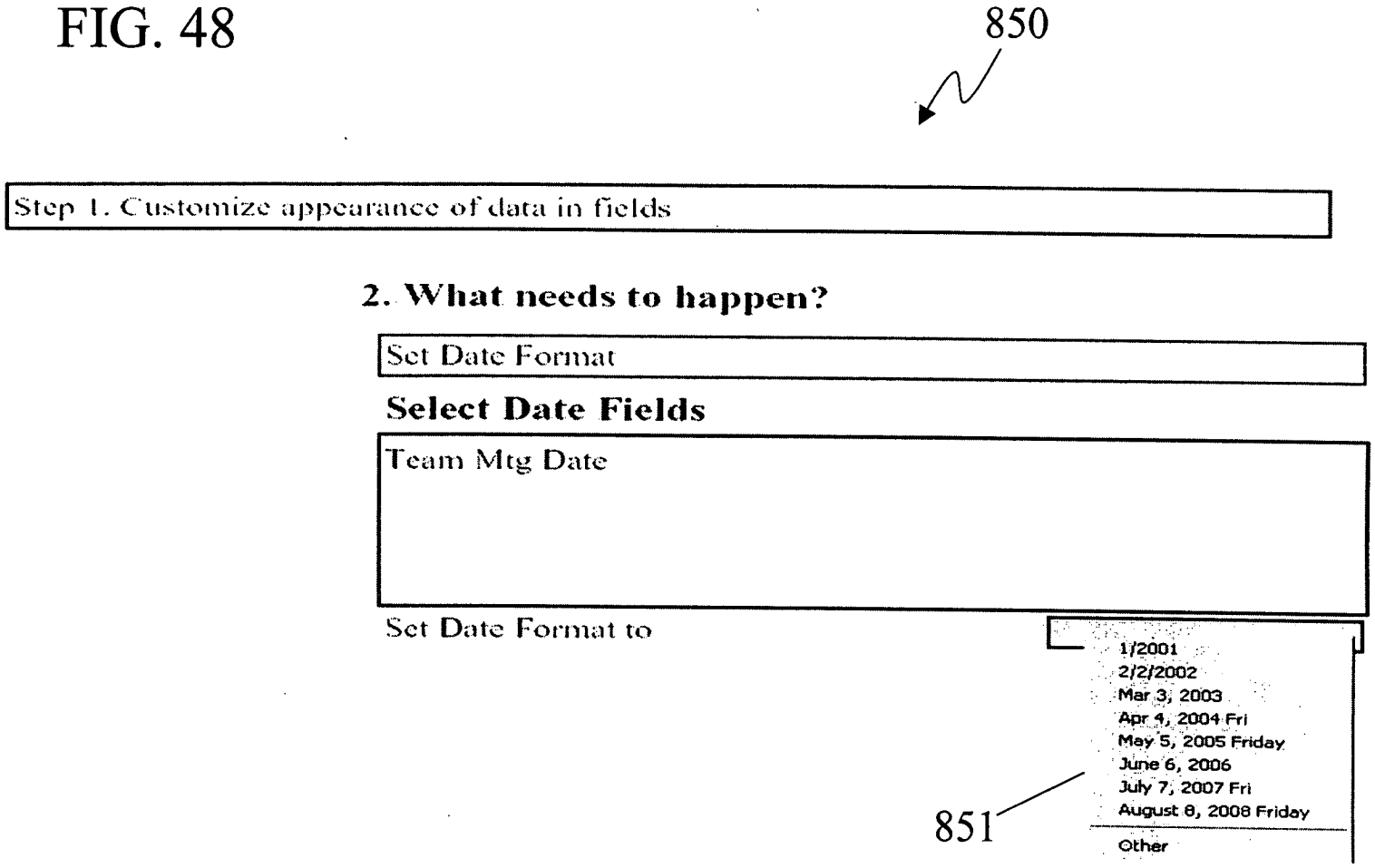

829a
Step 1. Customize appearance of data in fields
829b
2. What needs to happen?
831
832
833
834
835
836
837
838
839
Set Check Box Format
Set Date Format
Set Number Format to 0 - 2 Decimals
Set Number Range
Set Percent Format
Set Phone Format
Set Social Security Format
Set Text Typing Limit on Multiline or Single Line
Set Zip Code Format
Clear the field (x)
830

FIG. 47


840
Step 1. Customize appearance of data in fields
843
2. What needs to happen?
Do it
Set Check Box Format
Select CheckBox Fields
Purpose1
Purpose2
Purpose3
Purpose4
Purpose5
Purpose6
Purpose7
Purpose8
Purpose9
Clear the field (x)
Erase Last Choice (z)
Set Check Style to
star
Check
Cross
Diamond
Circle
Star
Square
Other
Clear the field (x)
842
841

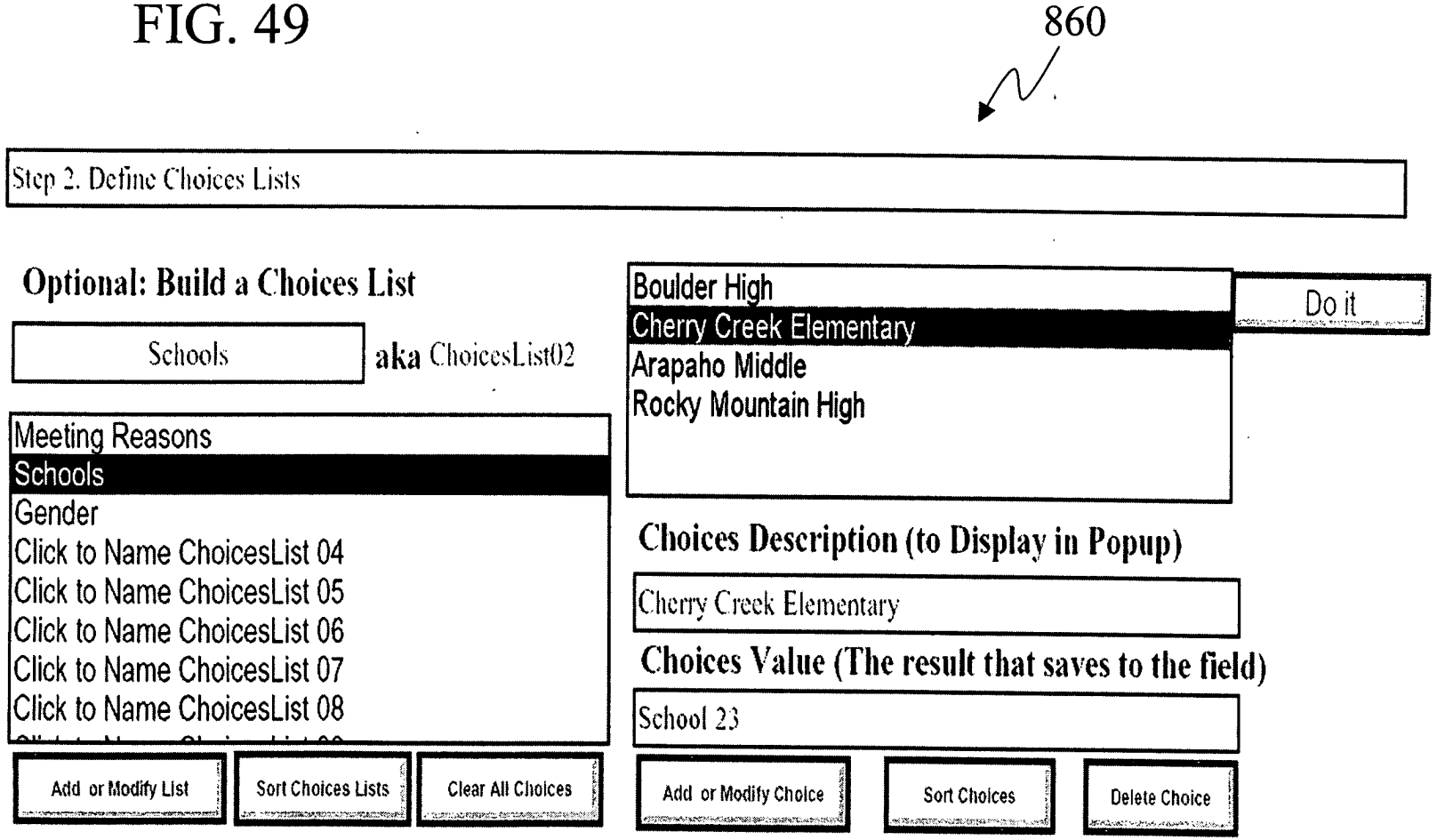
OIPE
DEC 0 3 2003
TRADEMARK OFFICE

FIG. 48



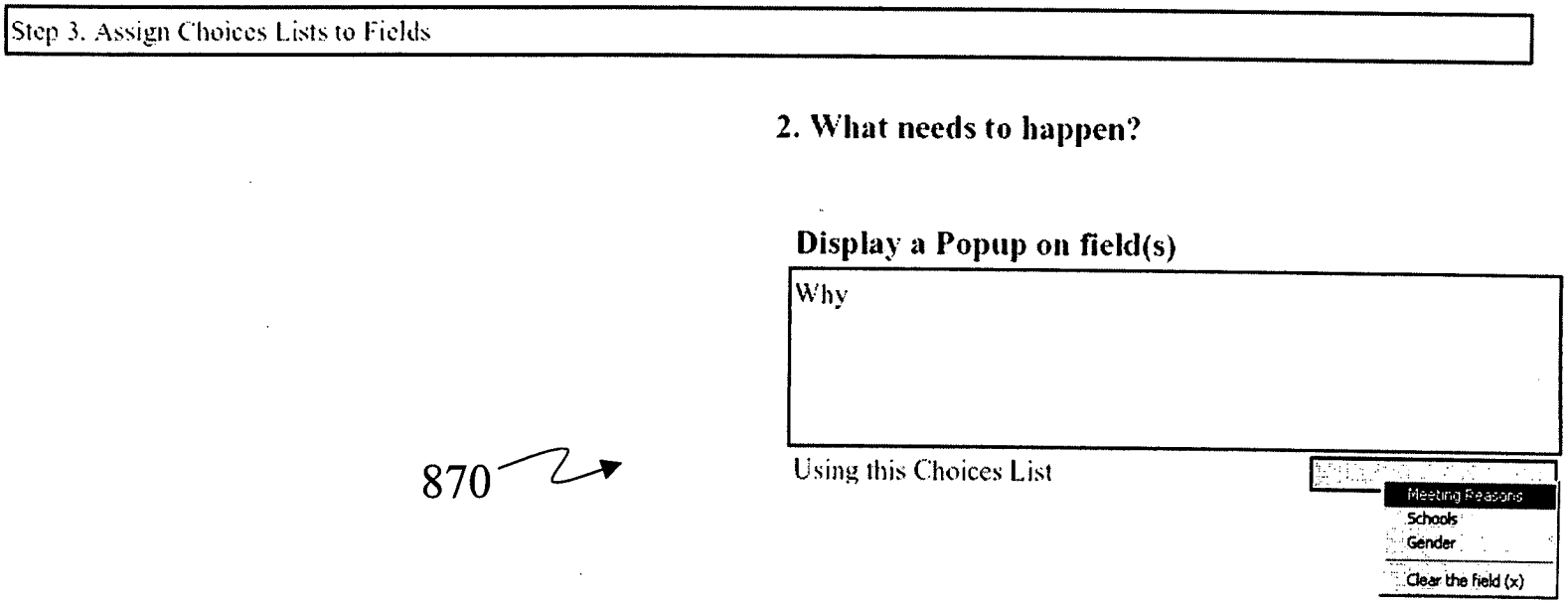
PATENT & TRADEMARK OFFICE
DEC 0 3 2003
OIPE
JC177

FIG. 49



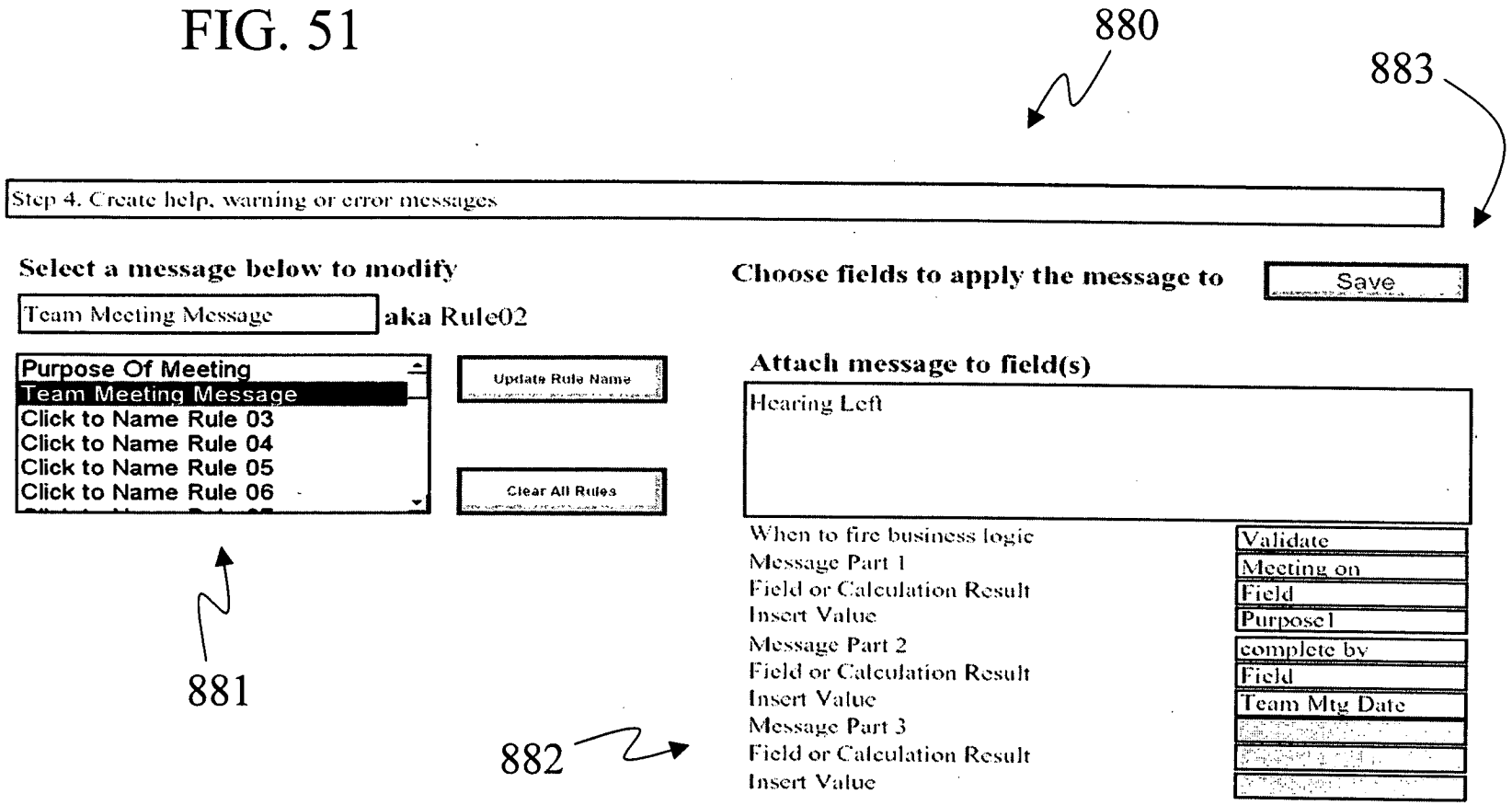
PATENT & TRADEMARK OFFICE
DEC 03 2003
OIPE
JC177

FIG. 50



PATENT & TRADEMARK OFFICE
DEC 03 2003
OIPE
SC17

FIG. 51



PATENT & TRADEMARK OFFICE
DEC 03 2003
OIPE
SC177

FIG. 52

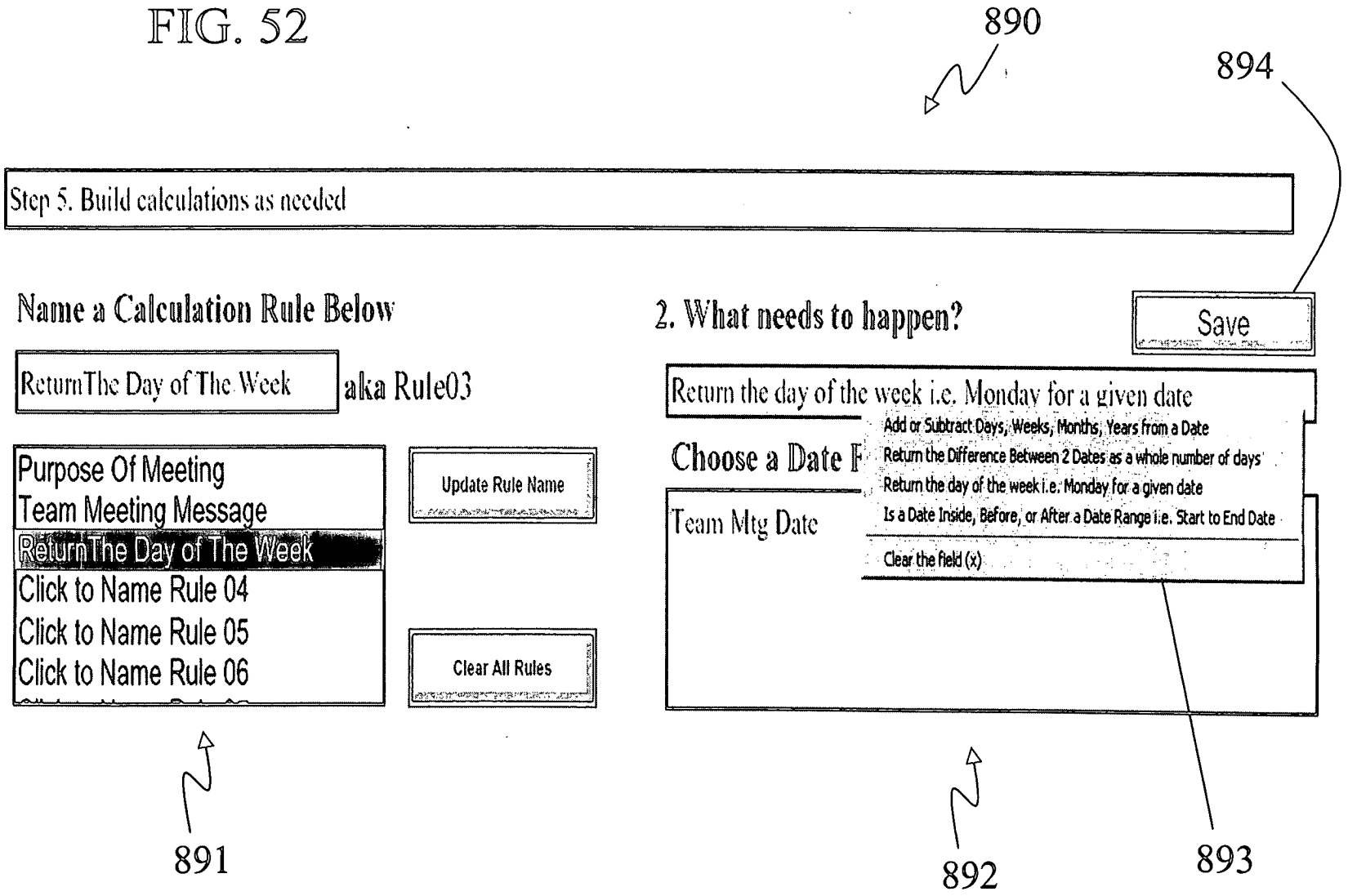


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FIG. 53

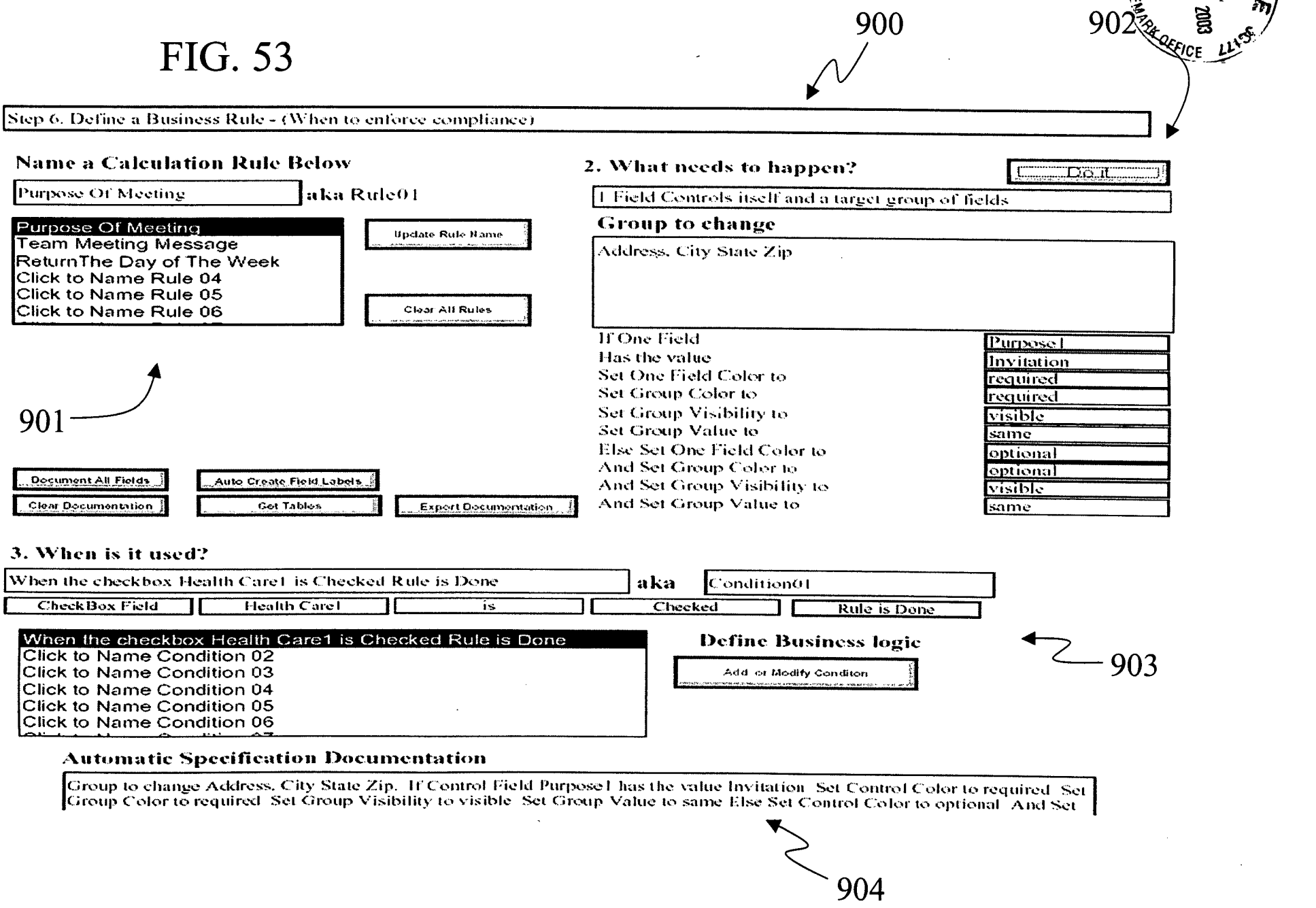

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FIG. 54

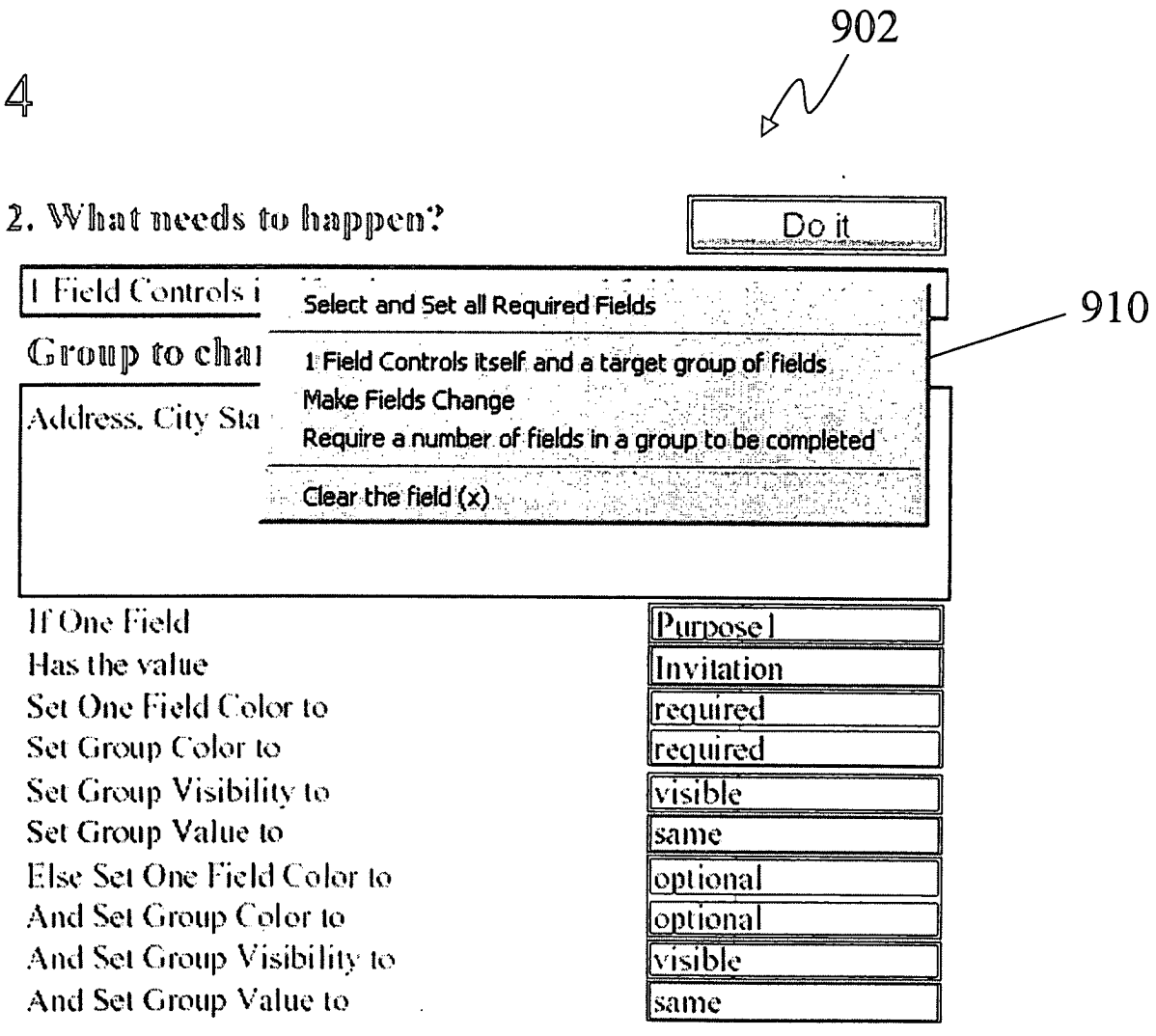

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FIG. 55

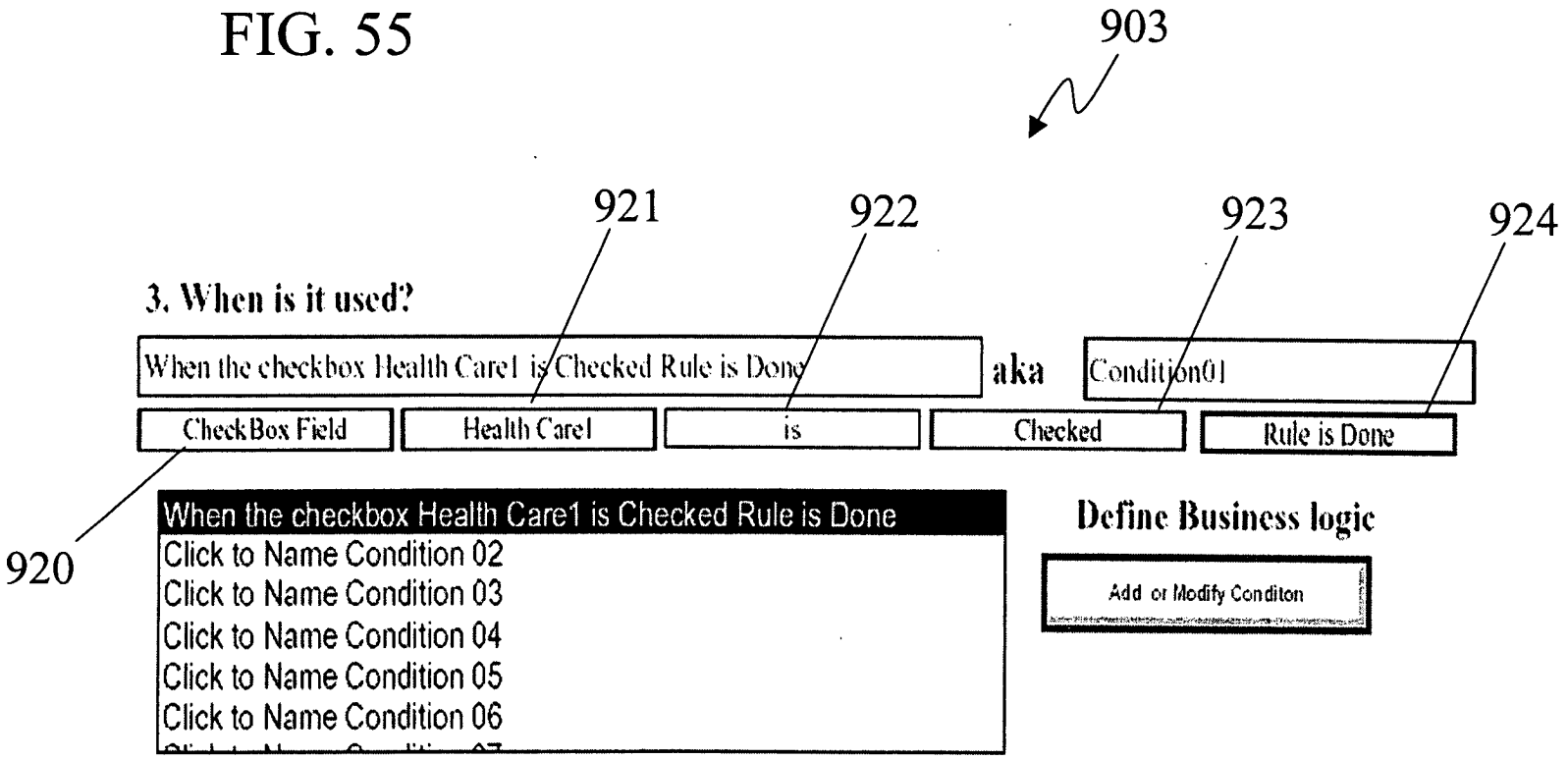

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FIG. 56

930

Automatic Specification Documentation

Group to change Address. City State Zip. If Control Field Purpose1 has the value Invitation Set Control Color to required Set Group Color to required Set Group Visibility to visible Set Group Value to same Else Set Control Color to optional And Set Group Color to optional And Set Group Visibility to visible And Set Group Value to same

Javascript Created

ObjectControls({ TargetObjectArrayOrPrefix:
[ostrAddress,ostrCityStateZip],ControllingField:ochkPurpose1,TheControlValue:"Invitation",ControlColorIfTrue:"required",TargetColorIfTrue:"required",TargetDisplayIfTrue:"visible",TargetValueIfTrue: "same",ControlColorIfFalse:"optional",TargetColorIfFalse:"optional",TargetDisplayIfFalse:"visible",TargetValueIfFalse: "same"})

931

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FIG. 57

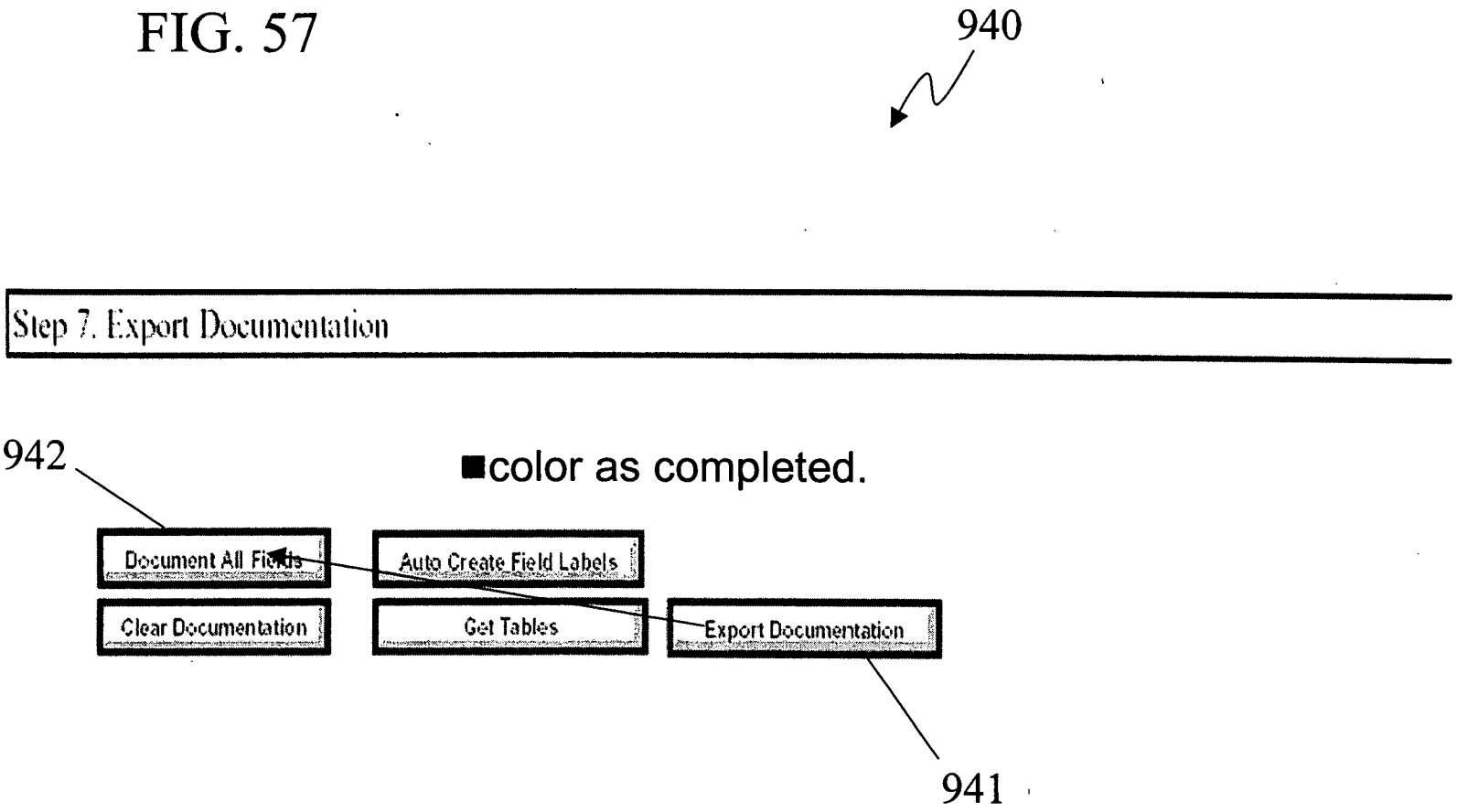

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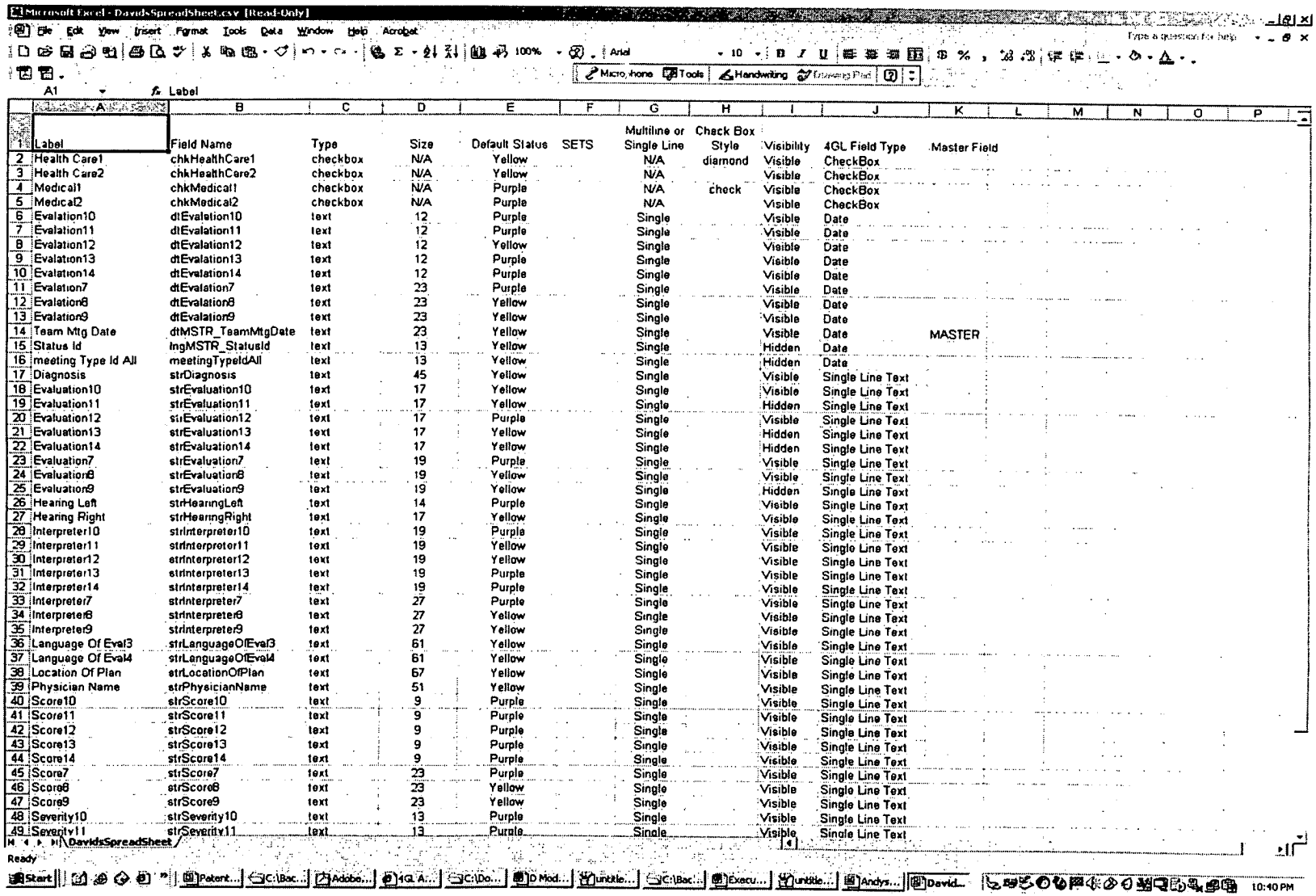
FIG. 58



Microsoft Excel - DavidsSpreadSheet.csv [Read-Only]

	Label	Field Name	Type	Size	Default Status	SETS	Multiline or Single Line	Check Box Style	Visibility	4GL Field Type	Master Field
2	Health Care1	chkHealthCare1	checkbox	N/A	Yellow		N/A	diamond	Visible	CheckBox	
3	Health Care2	chkHealthCare2	checkbox	N/A	Yellow		N/A		Visible	CheckBox	
4	Medical1	chkMedical1	checkbox	N/A	Purple		N/A	check	Visible	CheckBox	
5	Medical2	chkMedical2	checkbox	N/A	Purple		N/A		Visible	CheckBox	
6	Evalation10	dtEvalation10	text	12	Purple		Single		Visible	Date	
7	Evalation11	dtEvalation11	text	12	Purple		Single		Visible	Date	
8	Evalation12	dtEvalation12	text	12	Yellow		Single		Visible	Date	
9	Evalation13	dtEvalation13	text	12	Purple		Single		Visible	Date	
10	Evalation14	dtEvalation14	text	12	Purple		Single		Visible	Date	
11	Evalation7	dtEvalation7	text	23	Purple		Single		Visible	Date	
12	Evalation8	dtEvalation8	text	23	Yellow		Single		Visible	Date	
13	Evalation9	dtEvalation9	text	23	Yellow		Single		Visible	Date	
14	Team Mtg Date	dtMSTR_TeamMtgDate	text	23	Yellow		Single		Visible	Date	MASTER
15	Status Id	lngMSTR_StatusId	text	13	Yellow		Single		Hidden	Date	
16	meeting Type Id All	meetingTypeIdAll	text	13	Yellow		Single		Hidden	Date	
17	Diagnosis	strDiagnosis	text	45	Yellow		Single		Visible	Single Line Text	
18	Evaluation10	strEvaluation10	text	17	Yellow		Single		Visible	Single Line Text	
19	Evaluation11	strEvaluation11	text	17	Yellow		Single		Hidden	Single Line Text	
20	Evaluation12	strEvaluation12	text	17	Purple		Single		Visible	Single Line Text	
21	Evaluation13	strEvaluation13	text	17	Yellow		Single		Hidden	Single Line Text	
22	Evaluation14	strEvaluation14	text	17	Yellow		Single		Hidden	Single Line Text	
23	Evaluation7	strEvaluation7	text	19	Purple		Single		Visible	Single Line Text	
24	Evaluation8	strEvaluation8	text	19	Yellow		Single		Visible	Single Line Text	
25	Evaluation9	strEvaluation9	text	19	Yellow		Single		Hidden	Single Line Text	
26	Hearing Left	strHearingLeft	text	14	Purple		Single		Visible	Single Line Text	
27	Hearing Right	strHearingRight	text	17	Yellow		Single		Visible	Single Line Text	
28	Interpreter10	strInterpreter10	text	19	Purple		Single		Visible	Single Line Text	
29	Interpreter11	strInterpreter11	text	19	Yellow		Single		Visible	Single Line Text	
30	Interpreter12	strInterpreter12	text	19	Yellow		Single		Visible	Single Line Text	
31	Interpreter13	strInterpreter13	text	19	Purple		Single		Visible	Single Line Text	
32	Interpreter14	strInterpreter14	text	19	Purple		Single		Visible	Single Line Text	
33	Interpreter7	strInterpreter7	text	27	Purple		Single		Visible	Single Line Text	
34	Interpreter8	strInterpreter8	text	27	Yellow		Single		Visible	Single Line Text	
35	Interpreter9	strInterpreter9	text	27	Yellow		Single		Visible	Single Line Text	
36	Language Of Eval3	strLanguageOfEval3	text	61	Yellow		Single		Visible	Single Line Text	
37	Language Of Eval4	strLanguageOfEval4	text	61	Yellow		Single		Visible	Single Line Text	
38	Location Of Plan	strLocationOfPlan	text	67	Yellow		Single		Visible	Single Line Text	
39	Physician Name	strPhysicianName	text	51	Yellow		Single		Visible	Single Line Text	
40	Score10	strScore10	text	9	Purple		Single		Visible	Single Line Text	
41	Score11	strScore11	text	9	Purple		Single		Visible	Single Line Text	
42	Score12	strScore12	text	9	Purple		Single		Visible	Single Line Text	
43	Score13	strScore13	text	9	Purple		Single		Visible	Single Line Text	
44	Score14	strScore14	text	9	Purple		Single		Visible	Single Line Text	
45	Score7	strScore7	text	23	Purple		Single		Visible	Single Line Text	
46	Score8	strScore8	text	23	Yellow		Single		Visible	Single Line Text	
47	Score9	strScore9	text	23	Yellow		Single		Visible	Single Line Text	
48	Severity10	strSeverity10	text	13	Purple		Single		Visible	Single Line Text	
49	Severity11	strSeverity11	text	13	Purple		Single		Visible	Single Line Text	

DavidsSpreadSheet

Ready

10:40 PM

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FIG. 59

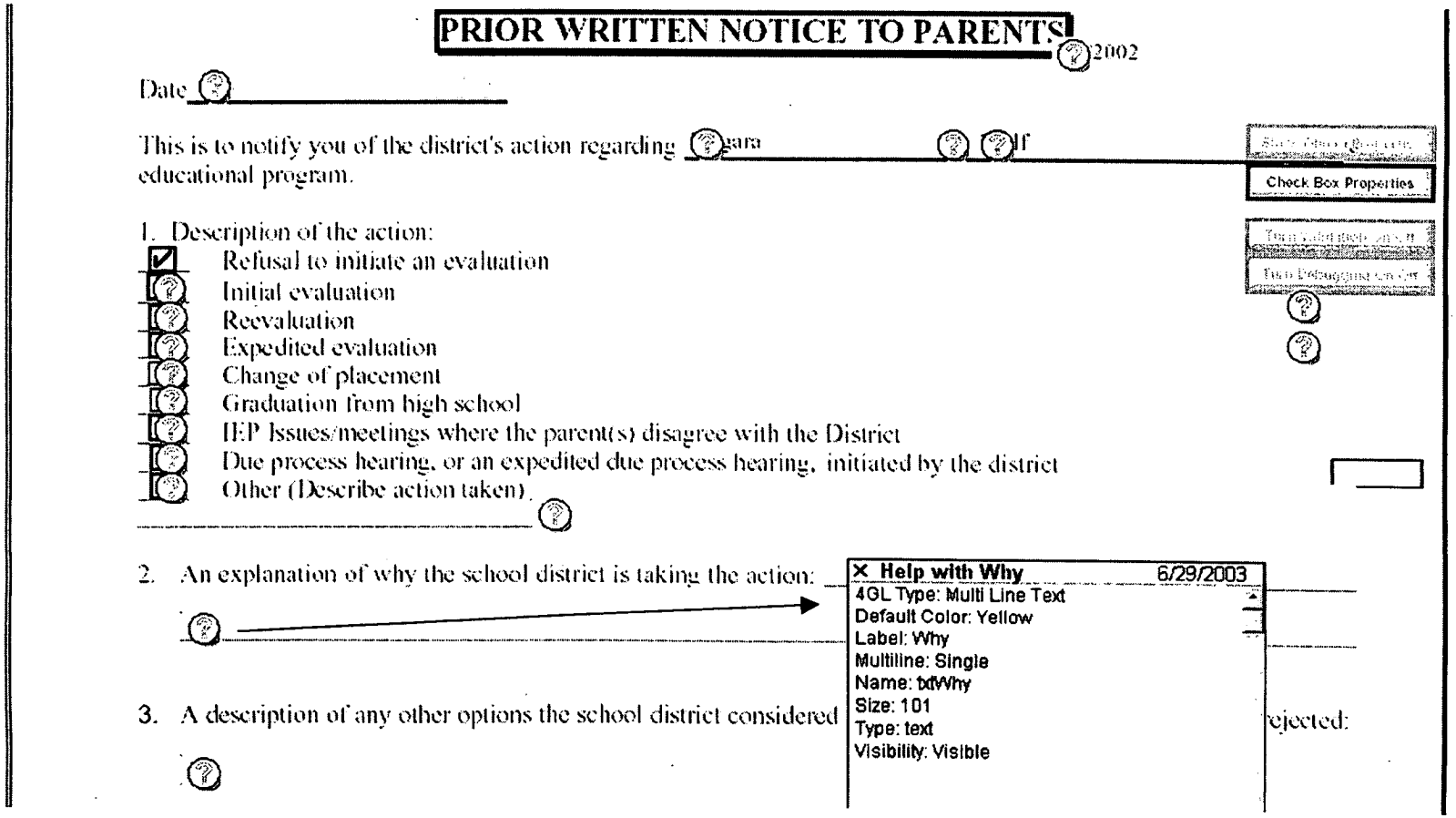

FIG. 60A

PATENT & TRADEMARK OFFICE DEC 0 3 2003 OIPE

FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
INVITATION	Modified day checkbox	X				
	Transition to school age checkbox	X			.1501 Q	
	Purpose -change in educational placement	X			.1507 E (2)	300.345 (B) (1) (i)
	Date	X		X		300.345
	Student Invitation	X	X		.1504 B (7)	300.345 (b) (2) (3)
	Time				.1507 E (1)&(2)	300.345(b)(1)(i)
	Location				.1507 E (2)	300.345(b)(1)(i)
	Attendees	X			.1504 B	300.344 Appendix A # 7

FIG. 60B

FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
IEP						
DEC 4_1	IEP Duration Dates	X			.1507 C(7) & G(1)	300.347 (a) (6)
	Student's Disability				.1507 A	300.347 (a)
	# of Disabilities				.1501 A	300.7 (b) & (c)
	Specific Factors				.1507 B(2)	300.346 (a) (2)
	- student strengths				.1507 B(1)(a)	300.346 (a)(1)(i)
	- parent concerns				.1507 B(1)(a)	300.346 (a)(1)(i)
	- behaviors impede	X	X		.1507 B(2)(a)	300.346 (a)(2)(i) 300.346 (c)
	- limited English			X	.1507 B(2)(b)	300.346 (a)(2)(ii)
	- use of Braille				.1507 B(2)(c)	300.346 (a)(2)(iii)
	- communication needs	X	X		.1507 B(2)(d)	300.346 (a)(2)(iv)
	- deaf or hard of hearing	X		X	.1507 B(2)(d)	300.346 (a)(2)(iv)
	-assistive technology	X	X		.1507 B(2)(e)	300.346 (a)(2)(v)

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FIG. 60C

PATENT & TRADEMARK OFFICE DEC 03 2003 OIPE

FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
	Other Factors					
	- Adaptive Physical Education	X		X	.1501 B	300.307
	- 17 and informed of rights	X		X	.1512 R	300.347(c)
	- Transition	X		X	.1507 C(8) & (9)	300.347 (b)
DEC 4 Attachment	**Special Factors to Be Considered For a Student Who is Deaf or Hard of Hearing**	X			.1507 B(2)(d)	300.346 (a)(2)(iv)
	- language and communications skills				.1507 B(2)(d)	300.346 (a)(2)(iv)
	- opportunities for direct communication with peers and professional personnel in the student's language communication mode				.1507 B(2)(d)	300.346 (a)(2)(iv)
	- academic levels				.1507 B(2)(d)	300.346 (a)(2)(iv)
	- full range of needs, including direct instruction in the student's language and communication mode				.1507 B(2)(d)	300.346 (a)(2)(iv)
DEC 4_2	Present Level of Performance				.1507 C(1)	300.347 (a)(1)
	Specific Need		X			
	Annual Goal				.1507 C(2)	300.347 (a)(2)
	Objectives/Benchmarks	X	X		.1507 C(2)	300.347 (a)(2)
	Measures of Progress	X	X		.1507 (12)(a)	300.347 (a)(7)(i)

FIG. 60D

FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
DEC 4 _3	Appropriate supplementary aids....				.1507 C(3)	300.347 (a)(3)
	Regular Program Participation				.1507 C(3)(b)	300.347 (a)(3)(ii)
	Testing Program	X	X		.1507 C(5) & (6)	300.347(a)(5)(i)(ii)
	Anticipated Frequency and Location of Special Education and Related Services				.1507 C(7)	300.347 (a)(6)
	- related services	X			.1501 L	300.24
DEC 4_4	Change in Placement checkbox	X				
	Modified Day checkbox	X				
	4 Period HS checkbox	X				
	Continuum of Alternative Placements	X	X	X	.1510 D	300.551
	The extent the student w ill be removed from regular peers				.1507 C(4)	300.347(a)(4) Appendix A #1

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FIG. 60E

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FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
	How and When parents will be informed of student's progress toward annual goals	X	X		.1507 (12)(b)	300.347(a)(7)(ii)
	ESY	X		X	.1507 D	300.309
	IEP Team Signatures	X		X	.1504 B	300.344
Transition	14+ years =statement	X	X		.1507 C(8)	300.347(b)(1)
	16+ years = plan	X	X		.1507 C(9)	300.347(b)(2)

FIG. 60F

FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
Transition page 1	**Transition Statement**					
	Present level of Performance for Transition (preferences and interest)				.1501 P	300.29
	Where and how info was obtained		X			
	Desired Post-School Outcomes				.1501 P	300.29
	Standard Course of Study				.1501 P	300.29
Transition Page 2	**Transition Plan (combined w/page1)**					
	Instruction				.1501 P	300.29
	Employment Functional Vocational Evaluation				.1501 P	300.29
	Community Experiences				.1501 P	300.29
	Daily Living Skills/Adult Living				.1501 P	300.29
	Related Services				.1501 P	300.29
	- yes/no fields for each area		X			
	- services needed for each area				.1507 C(8)	300.347(b)(1)
	- agency responsible for each area				.1507 C(9)	300.347(b)(2)
BIP	**Behavior Intervention Plan**	X			.1507 B(2)(a) .1516 D(2)	300.346 (c) Appendix A #38
PK Dec 4_3	For preschool children describe how the child is involved in a regular program:			X		300.347(a)(1)(ii) &(a)(2)(i)
	Anticipated Frequency and Location of Time...				.1507 C(7)	300.347(a)(6)
	Continuum of Alternative Placements				.1510 F	300.551
	The extent to which the student will be removed from regular peers, if any.				.1507 C(4)	300.347(a)(4) Appendix A #1

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FIG. 60G

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FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
	How and When parents will be informed of student's progress tow ard annual goals	x	X		.1507 C(12)(b)	300.347(a)(7)(ii)
PK DEC 4_4	ESY	x		X	.1507 D	300.309
	IEP Team Signatures	X		X	.1508 B	300.344
WSFCS' Progress Report	Progress Report	X			.1507 C(12) (b)	300.347(a)(7)(ii)
RE 1	Parent Contact Record Classroom Observation			X	BED .1505 D(1)(a)(ii)(iii) LD .1505 D 8)(b)(i)(iii)	
RE 1(a)	Attendance/Grades Previous Testing Health Screening Vision/Hearing Screening			X	BED .1505 D(1)(a)(iv)(v)(vi) LD .1505 D(8)(b)(iv)(v)(vi)	
RE 1(b)	Intervention Strategies			X	BED .1505 D(1)(a)(i) LD .1505 D(8)(b)(ii)	
RE 1(c)	Referral Committee Decision Referral Committee Members			X	BED .1505 D(1)(b)(i)(ii)(iii)	

FIG. 60H

FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
RE 2	Parental Notification of Screening Procedures			X	.1501 M	
RE 2(a)	Parent Consent for Individual Screening(s)		X			
DEC 1 page 1&2 and PK DEC 1 page 1&2	Reason for Referral Strengths Needs	X			.1503	
	Referral Received Date	X		X	.1505 F(3)	
DEC 1_3 and PK DEC 1_3	Referral Committee Decision			X		
DEC 2	Consent for Evaluation/Reevaluation		X		.1505 A .1512 C(2) .1506 E	300.505
	Description of evaluation procedures				.1505 A (1)	300.500(b)(1)(i)
	Parent Absent button	X				
DEC 3/RAT	Report for Additional Testing / Reevaluation Review		X		.1506 A & B	

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FIG. 60I

FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
DEC 3 and PK DEC 3	**Summary of Evaluation Results And Eligibility Determination Under Check Purpose**				.1505 F(2)	300.534
	Initial Evaluation	X				
	- Suspected Category	X			.1505 E	
	Reevaluation	X	X			
	- Suspected Category	X	X			
	Change in Category	X				
	- Suspected Category	X			.1505 E	
	- Current Category	X	X			
	Exit SLI (Articulation)					

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FIG. 60J

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FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
	Related Service	X				
	Additional Assessment	X	X			
	Exit PT, OT, Artic.	X				
	Eligibility Statement	X				300.535
DEC 3 (a)	**Eligibility Report/Specific Learning Disabilities**				.1505 D(8)(d)(e)	300.543
	Ability Achievement Discrepancy	X			.1505 D(8)(c)(iii)	
	Information Processing				.1505 D(8)(e)(iii)a	300.543 (a)(4)
	Substantial Learning Difficulties				.1505 D(8)(e)(iii)c	300.543 (a)(6)
	Relevant Medical Findings				.1505 D(8)(e)(iii)b	300.543 (a)(5)
	Effects of environmental, cultural, or economic disadvantage.				.1505 D(8)(e)(iii)e	300.543 (a)(7)
	Relevant Behaviors noted during observation			X	.1505 D(8)(e)(iii)a	300.543 (a)(3)
	Does the student have a learning disability?				.1505 D(8)(e)(iii)f	300.543 (a)(1)

FIG. 60K

FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
DEC 3 (b)	**Eligibility Report/Behaviorally Emotionally Disabled**					
	A student must show evidence of one or more of the following characteristics of the Definition of BED....				.1501 A(2)	300.7(c)(4)
	A student must meet all 5 criteria listed below in order to....				.1505 D(1)(d)	
DEC 3 (c)	**Eligibility Report/Other Health Impaired**				.1501 A(8)	300.7(c)(9)
	Strength/Vitality/Alertness				.1501 A(8)	300.7(c)(9)
	Behaviors adversely affecting educational performance				.1501 A(8)	300.7(c)(9)(ii)
DEC 5	**Prior Written Notice**				.1512 D	300.503
	Description of the action proposed				.1512 D (1) (a)	300.503 (b)(1)
	Explanation of the action proposed				.1512 D (1)(b)	300.503 (b)(2)
	Options rejected				.1512 D (1)(c)	300.503 (b)(3)
	Description of evaluations and other relevant factors				.1512 D (1)(d)(e)	300.503 (b)(4)&(5)
					.1512 D (1)(f)	300.503 (b)(6)
	Sources for parents to contact				.1512 D (1)(f)	300.503 (b)(7)
DEC 6	**Consent For Initial Placement For Special Education Services**				.1512 C(2)	300.505
	Parent Absent button	X				
DEC 7	**Reevaluation Determination Form**				.1506	300..533
	Review of existing evaluation data				.1506 A	300.533 (a)(1)
	Summary of evaluations provided by parent				.1506 A(1)	300.533 (a)(1)(i)
	Summary of classroom assessments and observations				.1506 A(2)	300.533 (a)(1)(ii)
	Summary of observations by teachers and service providers				.1506 A(3)	300.533 (a)(1)(iii)
	Is additional data needed to determine:					
	- If the student continues to have a disability				.1506	300.533 (a)(2)(i)

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FIG. 60L

FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
	- Present levels of performance and needs				.1506	300.533 (a)(2)(ii)
	- Continued need for special education				.1506 C	300.533 (a)(2)(iii)
	- additions or modifications to special education				.1506	300.533 (a)(2)(iv)
	Determination of need for additional assessment				.1506 D	300.533(c)(d)
	Parent Request for additional assessment				.1506 E	300.533(d)(2)
FBA	**Functional Behavior Assessment**				.1516 D(2)	300.520(b)(1)
MDW	**Manifestation Determination Worksheet**				.1516 F & G	300.523 300.524
	Questions for Discussion					
	- IEP was appropriate				.1516 F(4)(b)(i)	300.523 (c)(2)(i)
	- Placement was appropriate				.1516 F(4)(b)(i)	300.523 (c)(2)(i)
	- Supplemental aids and related services were provided				.1516 F(4)(b)(i)	300.523 (c)(2)(i)
	- Appropriate BIP was implemented				.1516 F(4)(b)(i)	300.523 (c)(2)(i)
	- Student's disability did not impair the ability to understand consequences of the behavior				.1516 F(4)(b)(ii)	300.523 (c)(2)(ii)
	- Student's disability did not impair the ability to control the behavior				.1516 F(4)(b)(iii)	300.523 (c) (2)(iii)
	- Misconduct is Not a Manifestation				.1516 G	300.524 (a)
	- Misconduct is a Manifestation				.1516 F	300.523 (d)